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ABSTRACT

This curriculum guide contains an outline of training programs for child mental health specialists at three educational levels--Associate of Arts, Bachelor of Arts, and Masters of Arts. These programs focus on the acquisition of skills and knowledge through academic subjects, clinical activities, clinical rotation services, and field experiences. The academic curriculum lists each course and its contents by educational level and by speciality, in either the area of child mental health or special education. The clinical curriculum outlines the various field experiences available to trainees at the three educational levels. The final section presents a chart of career opportunities by education level, and categorizes each employment situation as either an intervention or prevention activity. (Author/RIM)

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A MODEL TRAINING PROGRAM
FOR A NEW CHILD-CARING PROFESSIONAL
FOR
A BROAD SPECTRUM OF SERVICES
IN CHILD MENTAL HEALTH AND EDUCATION

U S DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

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CG 014929

FINAL REPORT TO THE NIMH
Grant Number 5 T21 MH 13426-04

By

Norbert I Rieger, M.D.

The Norbert I Rieger Children's Treatment Center
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Camarillo, California 93010

July 1977

APPENDIX I

APPENDIX I

LIST OF COURSES, COURSE CONTENT,

AND

CLINICAL AND EDUCATIONAL ROTATION DIRECTORY

AND

CAREER APPLICATIONS

IN THE

FINAL PROTOTYPE CURRICULUM OF THE

CHILD MENTAL HEALTH SPECIALIST PROGRAM

FOR ASSOCIATE OF ARTS, BACHELOR, AND MASTER DEGREES

A MODEL TRAINING PROGRAM

FOR A NEW CHILD-CARING PROFESSIONAL

FOR

A BROAD SPECTRUM OF SERVICES

IN CHILD MENTAL HEALTH AND EDUCATION:

THE CHILD MENTAL HEALTH SPECIALIST

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INTRODUCTION

INTRODUCTION

TO THE CHILD MENTAL HEALTH SPECIALIST

TRAINING CURRICULUM

One of the experiences that stands out above all others from many years of working with children has been the observation that the care, treatment, clinical management, and education of disturbed children is as good as the person who provides that care during most of the child's waking hours. Unfortunately, our tradition has been to assign the least trained and the least clinically sophisticated personnel to work in direct contact with these children. They are the primary caregivers, but the lowest paid, the lowest in prestige, and the lowest ranking on the hierarchal scale of staffing in institutional settings such as state mental hospitals, day treatment centers, day care centers, Head Start, and in settings for the rehabilitation of delinquent children within the Juvenile Justice System such as the Juvenile Hall. No special requirements exist, at the present time, to qualify a person for child care work. No standards of training of child care workers have been developed, no standards of care, and no code of ethics to guide their work as is required, for instance, of teachers.

However critical one may be of the state of affairs of educating children in public schools, and of the present training of teachers for educating children in the postindustrial era, a college education and one or two years of graduate work is a minimum requirement for teaching credentials. The teacher is required to be familiar with the age-appropriate curricula for any given group of children. The teacher is required to master the methodology of teaching, and to be guided by a code

of ethics in the classroom, and to follow certain professional standards. No such requirements for education or training exist in regard to standards of care and treatment of disturbed children. No credentials or other qualifications, or licensure, or code of ethics exist for child care workers--notwithstanding the fact that the care and clinical management of disturbed children is a much more complex and arduous undertaking than teaching normal children in a public school. Such omission at our present stage of civilization is an astonishing oversight on the part of our society--an unspoiled heritage in its pristine quality, preserved intact from the Middle Ages. Through such an omission our society conveys a loud and clear message: Millions of children are expendable.

Unfortunately, and tragically, the message is not limited to our disturbed children. It potentially involves every child of school age and the mental health of every future adult. In short, it involves the psychological survival of our society from a future historical perspective. Society's oversight of the most downtrodden of its children is only an extension of its oversight of the importance of helping children develop their psychological potential as part of their compulsory education in public schools: the integration of the affective components with the cognitive and social aspects in the education of children in public schools during the first fifteen or more years of life. One suspects that the same psychodynamic forces that preserved an island of the Middle Ages in respect to standards of care for severely disturbed children are the same forces that have made us blind to the need for helping develop psychological potential and for integration of affective components along with the development of the intellectual potential of our children.

The philosophy underlying the concept of the new child care professional has been the experience that anyone who plans on a career of dealing with children in either clinical or educational settings needs to develop a child-centered attitude, commitment, and a coherent viewpoint of the child's developmental, social, psychological, emotional, and educational needs, as reflected in the writings of Winnicott, Spitz, Bowlby, Erikson, Piaget, and others. Such a person needs to acquire basic knowledge in the life sciences such as the functional aspect of the central nervous system, with special emphasis on the three brains and the arousal system, the biochemistry that mediates their functions, and basic understanding of the pharmacology now in use to influence a child's behavior. Familiarity with basic knowledge and understanding of the clinical, psychological, and social sciences is indispensable, as is basic knowledge and skills in the education and communication sciences.

In our program we prefer instructors of academic subjects to be clinically active staff at the Children's Treatment Center, or at least that they have a background of clinical training and experience. But any university or college has competent instructors in these various disciplines available for teaching such subjects. The knowledge of these subjects can be taught in academic settings; but the process aspect of the training needs to be carried on in a clinical setting where students learn not only to apply the knowledge which they have gained in the academic classes, but where there is an opportunity to also become aware of the process component of their training through the help of individual supervisors.

However important a role the acquisition of knowledge and skills in these interdisciplinary subjects plays in the training and in the competent functioning of the new

child care professional, they are overshadowed by the need to emphasize the process of the training, the process of child caring, and the process involved in the education and clinical management of disturbed children.* The clinical curriculum, therefore, has to emphasize the process component of training and provide the students with teachers and supervisors who could make them aware of the process that goes on in clinical settings dealing with disturbed children. Seminars conducted by well-trained and clinically experienced consultants in such subjects as sensitivity training, psychodrama, family therapy, group therapy, parent and teacher effectiveness training, can be very helpful to develop this awareness in the students. However important the seminars are in helping develop in the trainees process awareness, the clinical activities, particularly as they relate to the one-to-one involvement of trainees with children, are of crucial importance for the trainees to experience the process on a gut level.

The clinical activities of the students, from the day they are enrolled in the training program, are, therefore, part of the core of the curriculum. But this is only the beginning. From the moment they join the program, they are thrust into a very complex milieu where several levels of professionals and paraprofessionals, with various degrees of training, competencies and skills, interact with children, among themselves, with administrators, and with various agencies in the community. It is difficult for any student to escape the impact of this experience. Unless those

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* In clinical management is implied Winnicott's concept of "emotional holding" of a disturbed child, or Redl's concept of "life-space interview and providing emotional first aid."

responsible for their training, which includes all levels of staff and supervisors, teachers, coordinator, and director of training, focus on the processes and help the students with the working through of their anger, frustration, feelings of incompetence and inadequacy, which the children, staff, and other personnel provoke in them, they will not learn how to deal with these feelings during the training, and even less so later on when dealing with children in clinical settings and their families in the community in a professional capacity. Child care workers routinely complain about their "burned-out" feeling after a few years of work with disturbed children. This burned-out feeling may be the result of not having learned how to deal with and work through such gamut of feelings which severely disturbed children provoke in us in life-space situations in clinical settings.

Clinical rotation services are an integral part of the curriculum. It is mandatory that each student spend a minimum of twenty hours a week in direct work with individual and groups of children under staff supervision. Each student goes through six rotations of four months' duration each throughout the two-year training period. Usually, but not necessarily, the first two rotations are served at the Children's Treatment Center. All the other rotations may be served in various facilities and community agencies. One such four-month rotation service is available through the Los Angeles Childrens Hospital to get training and experience under supervision in psychological care for normal children who are hospitalized for medical and surgical reasons. Students may opt to rotate through the Developmental Disability Clinic at the University of California, Los Angeles, Medical School to develop skills in dealing with developmentally disabled children during infancy and toddler age. There are a number of other

clinical and educational facilities available to our students for rotation services in various nearby communities such as continuing services for children in a community mental health center, probation departments, community day treatment and residential care facilities, Satellite Treatment Homes, community adolescent treatment centers, learning centers for educationally handicapped, and many other clinical and educational facilities within a radius of ten to fifty miles.

The curriculum, both clinical and academic, needs to be flexible, dynamic, and eclectic in its contents. The training curriculum comprises clinical and academic, contents, and process components. Each of these plays an essential role in the training of the future child care professional. Of the various components, the academic is the easiest to teach, the process component and the awareness of it the most difficult to learn. It is the ongoing process in the training of the new professional and the explicit awareness of it that will determine the level of competency and the degree of effectiveness of the future child-caring professional. The academic knowledge and the clinical contents of the curriculum are instruments in the service of process mastery. The various components are singled out only to emphasize the need for their integration and the need for a holistic approach to the care, treatment, and education of children. The parts of the whole training tapestry are singled out to make the trainee aware of the contribution which each of the components makes to his training and to prepare him to become a competent professional in the child mental health field.

The traditional way of training of child psychotherapists, e.g., or, for that matter, any psychotherapist, requires personal supervision by experienced therapists. Very often the trainee in psychotherapy is, in addition, expected to undergo a

didactic therapy. This is needed not only for the future therapist to become aware of his own conflicts, blind spots, and to get an understanding of the working of unconscious forces, but also to heighten his awareness of the processes involved in his psychological and psychodynamic functioning and of the process of psychotherapy to alert him to his own resistances and countertransference forces which may interfere with the therapeutic process.

In the training of child care workers, teachers, and other line staff who work in direct contact with children, the need to become aware of intra- and interpersonal processes that go on in any encounter between adult and child, or any other two people, has been overlooked. This is especially the case in institutional settings and even in small group homes. The tendency, particularly in institutions, is ever present for staff on all levels to act out subtly, and sometimes not so subtly, one's own psychopathology without the person or even other staff becoming aware of it. If one considers the various degrees of training, or lack of training, and the different levels of competencies which various staff members bring into such a treatment facility, and if one also takes into consideration the various degrees of psychopathology which all of us bring into such a setting, it is not difficult to recognize how this could interfere with the development of a therapeutic milieu which is the rationale of existence of residential treatment settings. It is not always possible to avoid such acting-out behavior on the part of the staff. To some extent, it may go on even in well-managed institutional settings. The point is that the awareness of its presence and its potential ubiquitousness should be a requirement of anyone who works with children in any setting. To create such awareness in the child mental health trainee requires special resourcefulness and

ingenuity on the part of the staff, the supervisors, and the teachers. The effort to make the student aware of the internal and interpersonal processes needs to be an ongoing one and pervade every area of training and can be developed into a focus in all supervisory activities, all clinical seminars dealing with psychodynamics of child development, child psychopathology, family therapy and group treatment seminars. Role playing, psychodrama, and sensitivity training can be used with benefit in such a training program. No other single curriculum component can be used with comparable effectiveness for developing clinical competencies in the future child care professional.

The interdisciplinary nature of, and approach to the training of the child mental health professional has been emphasized in our training program as an integral part of our training philosophy. The student needs to become aware during his training years that competition, parochialism, hierarchal structure have no place when dealing with children in the mental health field. Also, since the Child Mental Health Specialist is to be a generalist, the interdisciplinary nature of the training will help the trainee develop and integrate the various and versatile skills which are now fragmented and distributed among several professions: educators, psychologists, social service workers, child psychiatrists, occupational therapists, etc. We have made a special effort to select instructors not only from the various disciplines but also representing different viewpoints in the same discipline.

In years to come, public and private educational systems, where children spend the biggest chunk of their waking hours during the first fifteen or more of their developmental years, will need to reach the largest possible numbers of children in a

preventive mental health effort. In such settings the greatest effort will be directed towards helping children develop their full psychological potential in preparing them for dealing with complex problems in a highly developed technological society. The Industrial Age needed a sophisticated society which required of its members the mastery of the three R's and, as a result, brought in its wake compulsory education. It may be assumed that the postindustrial revolution, which is producing a far more complex society, will require of its members a high level of intellectual, psychological, and social integration which could only be accomplished by a mentally healthy society. It will require, therefore, an educational system for our children which will provide them with an open-ended opportunity to develop their full psychological potentials and prevent its foreclosure, as it now often is the case.

The new child mental health professional who is trained to deal with the education in the cognitive area is also trained to integrate it with an affective component in the classroom process. He will have the awareness of the teaching process in the classroom and will develop the know-how of how to use the process of preparing children for positive mental health needed to meet the demands of a complex society. He will become an indispensable faculty member in every public and private school system. We also need to remember that our new professionals we are now training will develop their peak efficiency around the turn of the century and will be functioning as teachers and clinicians in the twenty-first century. The current curriculum is a beginning only which will require further refinement and standardization in years to come. But we no longer can postpone the development of such a professional in the child mental health field.

Thus, graduates of the Child Mental Health Specialist Training Program can opt for a career as teachers for normal and disturbed children, or for a career as clinical child care professionals, or for a career in both fields consecutively or alternately. The underlying philosophy of the Child Mental Health Specialist Training Program is the concept that normality may be conceived as a continuum at one end of which are the extremely disturbed children, and at the other end of which are the "ideally normal" ones. It is also based on the knowledge that there is no mentally disturbed person who does not have some islands of normality, and normal people who do not have some neurotic hang-ups, and that even the most normal among us cannot escape brief periods of irrational feeling, thinking, and behavior.

The clinical management of disturbed children is the most difficult and most challenging aspect of the training. Once the student has gone through such a training period, there is no reason why other skills and competencies should not be added to the curriculum to make the new professional a versatile, multifaceted, interdisciplinary generalist who could be effective in dealing with children in a variety of settings and develop the capacity to meet the developmental needs of children on a broad spectrum continuum of normal and exceptional children. The core curriculum for the training of the new professional in a clinical setting dealing with clinical problems is in the tradition of training clinicians. Training in child psychopathology and learning disabilities prepares the new professional for a better understanding of normal developmental needs and will help him develop a high degree of motivation to promote positive mental health in children in any setting--educational or clinical.

The final prototype training curriculum which has emerged after a seven-year trial project is described in this volume. It takes account of training procedures in other countries and other parts of the United States. It will provide continuity of training on the three degree levels--Associate of Arts, Bachelor of Arts, Master of Arts. It is calculated to prevent repetition and to integrate the three programs with career ladders and opportunities for branching into other professional areas or directions.

ACADEMIC CURRICULUM

1. LIST OF COURSES

ASSOCIATE OF ARTS DEGREE

TABLE A

Final Prototype Curriculum for the Associate of Arts Degree Training Program for Child Mental Health Specialists

YEAR 1 -- SEMESTER 1

Course Units		
1.5	1.	General Psychology (A)
3.0	2.	Introduction to Normal Child Growth and Development, Child Psychology
1.5	3.	Problems of Childhood (1)
		- Mental Retardation
		- Emotional Disorders
1.5	4.	Problems of Childhood (2)
		- Behavior Disorders
		- Antisocial Behavior
.75	5.	Child Health
.75	6.	Methods of Child Care
1.5	7.	Recreation--Crafts, Activity
.75	8.	Records and Reports
.75	9.	Child Discipline and Management
1.5	10.	The Family
4.5	11.	Practicum--Two days per week
18.0		

continued

TABLE A continued

YEAR 1 -- SEMESTER 2

Course Units		
1.5	1.	General Psychology (B)
1.5	2.	Introduction to Sociology and Anthropology
1.5	3.	Problems of Childhood (3) - Disadvantaged - Physically/Neurologically Handicapped - Treatment
1.5	4.	Learning Disabilities--Assessment and Remediation
.75	5.	Behavior Techniques/Management--Theory
1.5	6.	Behavior Techniques/Management--Special Problem Areas
1.5	7.	Group Management
1.5	8.	Communication--Reporting and Recording
.75	9.	Household Management Skills
4.5	10.	Practicum--Two days per week--Supervised Participation in the Nursery School
1.5	11.	Seminar--Options Including discussions of practicum experiences, understanding of self, and sensitivity training
18.0		

continued

TABLE A continued

YEAR 2 -- SEMESTER 1

Course Units		
1.5	1.	Child Psychology/Psychiatry (A)
1.5	2.	Group Dynamics (A)
1.5	3.	Problems of Childhood (4)
		- Attitude towards Mental Illness and Mental Retardation
		- Mental Disorders in Adolescence
1.5	4.	Adolescent Psychology
1.5	5.	Education Psychology/Education Techniques
1.5	6.	Nursery School Program and Kindergarten Program
1.5	7.	English Language and Children's Literature (A)
1.5	8.	Speech and Language--Assessment and Intervention
4.5	9.	Practicum--Two days per week
1.5	10.	Seminar--Options
		Including discussion of practicum, experiences, understanding of self, and sensitivity training
18.0		

continued

TABLE A continued

YEAR 2 -- SEMESTER 2

Course Units		
1.5	1.	Child Psychology/Psychiatry (B)
1.5	2.	Group Dynamics (B)
1.5	3.	The Preschool Child
1.5	4.	Problems of Childhood (5)
		- Drug/Alcohol Addiction
		- Hospital and Hospitalization
1.5	5.	Crisis Intervention
1.5	6.	Children's Classroom Instruction
1.5	7.	English Language and Literature for Preadolescents and Adolescents (B)
1.5	8.	The Juvenile and the Justice System
1.5	9.	University Course
4.5	10.	Practicum
18.0		

BACHELOR DEGREE

TABLE B

Final Prototype Curriculum for the Bachelor Degree Training Program for Child Mental Health Specialists

YEAR 3 -- SEMESTER 1

(for Years 1 and 2, see Table 13)

Course Units		
1.5	1.	Introductory Biology (A)
1.5	2.	Personality (A)
1.5	3.	Child Development Treatment and Services
1.5	4.	Learning Disabilities (A)
1.5	5.	Family (A)
1.5	6.	Philosophy and Religion
.75	7.	Community
.75	8.	Community Resources
1.5	9.	The Dependent Child--Social Work
1.5	10.	Crisis Intervention
4.5	11.	Practicum--Fieldwork
18.0		

continued

TABLE B continued

YEAR 3 -- SEMESTER 2

Course Units		
1.5	1.	Introductory Biology (B)
1.5	2.	Personality (B)
1.5	3.	Family (B)
1.5	4.	Learning Disabilities (B)
1.5	5.	Working with Parents of Disturbed Children
1.5	6.	Behavior Therapy
1.5	7.	Introduction to Staff and Diagnostic Conference
1.5	8.	Juvenile Delinquency--Probation
6.0	9.	Practicum--Fieldwork
18.0		

continued

TABLE B continued

YEAR 4 -- SEMESTER 1

Course Units		
1.5	1.	University Course
1.5	2.	University Course
1.5	3.	University Option--e.g., Contemporary Systems and Theories
1.5	4.	University Option--e.g., Advanced Child Growth and Development I
1.5	5.	Counseling: Interviewing (A)
1.5	6.	Family Relations
1.5	7.	Residential Programs
1.5	8.	Psychosocial Studies of the Minority Child
6.0	9.	Practicum
18.0		

continued

TABLE B continued

YEAR 4 -- SEMESTER 2

Course Units	
1.5	1. University Course
1.5	2. University Course
1.5	3. University Option
1.5	4. University Option--e.g., Experimental Psychology
1.5	5. Clinical Aspects of the Minority Child's World
1.5	6. Counseling (B)
1.5	7. Family Therapy
1.5	8. Advanced Child Growth and Development
6.0	9. Practicum
18.0	

MASTER DEGREE

OPTION I

TABLE C

Final Prototype Curriculum for the Master Degree Training Program
for (a) Child Mental Health Specialists
and (b) Education and Special Education

OPTION I: Masters Degree in Child Mental Health Specialist

YEAR 5 -- SEMESTER 1

(for Years 1-4, see Tables 13 and 14)

Course Units		
3.0	1.	University Course--Thesis
1.5	2.	Crisis Intervention
.75	3.	Basic Life Science
.75	4.	Basic Pharmacology
1.5	5.	Clinical Sciences and Techniques
1.5	6.	University Course
1.5	7.	University Course
1.5	8.	System Theories
3.0	9.	University Course
1.5	10.	Vocational Training
1.5	11.	Practicum Including practicum in specialized treatment facilities and experience in administration
18.0		

continued

TABLE C continued

OPTION I: Masters Degree in Child Mental Health Specialist

YEAR 5 -- SEMESTER 2

Course Units		
3.0	1.	University Course
1.5	2.	Treatment Planning
1.5	3.	Counseling-Interviewing/Crisis Intervention
3.0	4.	Behavior Management--Special Problem Areas
3.0	5.	Program Administration
1.5	6.	University Course
3.0	7.	University Course
1.5	8.	Education and Special Education
18.0		

continued

MASTER DEGREE

OPTION II

TABLE C continued

OPTION II: Masters Degree in Education with Emphasis in the Field of Special Education

YEAR 5 -- SEMESTER 1

(for Years 1-4, see Tables 13 and 14)

Course Units		
3.0	1.	University Course
3.0	2.	Learning Disabilities I: Reading Procedures Assessment and Remediation
3.0	3.	Learning Disabilities II: Math Procedures Assessment and Remediation
3.0	4.	Methods of Multicultural Education
4.0	5.	Diagnostic Testing
2.0	6.	Field Study: Special Education
18.0		

continued

TABLE C continued

OPTION II: Masters Degree in Education with Emphasis in the Field of Special Education

YEAR 5 -- SEMESTER 2

Course Units		
3.0	1.	Language and Speech Development and Disorders
3.0	2.	Behavior Modification Techniques for Multiple Handicapped, Emotionally Disturbed, and Autistic Children
2.0	3.	Organic and Cultural Basis for Severely Handicapped
3.0	4.	Diagnostic and Prescriptive Teaching of Reading
1.0	5.	Field Study
3.0	6.	University Course
1.0	7.	Learning Disabilities III: Motor-Perceptual Procedures
2.0	8.	The Severely Disturbed Adolescent
18.0		

continued

TABLE C continued

OPTION II: Masters Degree in Education with Emphasis in the Field of Special Education

YEAR 6 -- SEMESTER 1

Course Units		
3.0	1.	Counseling Exceptional Children and Parents (Individual and Group)
2.0	2.	Psychology of the Exceptional Child (Psychopathology of Childhood)
3.0	3.	Statistics
3.0	4.	Directed Teaching
(or)		(or)
3.0		Field Study: Special Education
1.0	5.	The Dependent Child--Social Work
(or)		(or)
1.0		Juvenile Delinquency--Probation
3.0	6.	University Course
3.0	7.	University Course
18.0		

continued

TABLE C continued

OPTION II: Masters Degree in Education with Emphasis in the Field of Special Education

YEAR 6 -- SEMESTER 2

Course Units		
3.0	1.	University Course
3.0	2.	Directed Teaching
(or)		(or)
3.0		Field Study
(or)		(or)
3.0		University Course
3.0	3.	Techniques of Teaching the Severely Handicapped and Working with Their Parents
		(Play Therapy)
3.0	4.	Learning Characteristics of the Developmentally Disabled
3.0	5.	Methods of Research (and)
2.0		Thesis or Project
1.0	6.	Field Study
18.0		

2. OUTLINE OF COURSE CONTENT

ASSOCIATE OF ARTS DEGREE

YEAR 1 -- SEMESTER 1

1.5[a] 1-1[b]

GENERAL PSYCHOLOGY (A)

Outline of Course Content

- Topics as in introductory psychology textbooks

3.0 1-1

INTRODUCTION TO NORMAL CHILD DEVELOPMENT

Outline of Course Content

- Nature vs Nurture
- Genetic Components
- Development during Pregnancy
- Cultural
- Interaction with Family/Caretaker

First Three Months:

- Birth experience
- Behavior tendencies at birth
- Characteristics

---

[a] This number refers to the number of units for the course. In this instance, 1.5 units.

[b] These numbers refer to the year and the semester. In this instance, the first year--the first semester.

INTRODUCTION TO NORMAL CHILD DEVELOPMENT continued

- Needs
- Reflexes
- "Failure to thrive"
- Malnutrition
- Cognitive/conceptual/intellectual/memory development
- Perceptual development
- Attending behavior
- Tactile development
- Motor development
- Social and affective development
- Language/verbalization development

3 Months to 1 Year:

- Growth abilities
- Needs for experiences
- Cognitive/conceptual/intellectual/memory development
- Perceptual development
- Speech development
- Personality development
- Body in age/orientation

INTRODUCTION TO NORMAL CHILD DEVELOPMENT continued

1 to 3 Years:

- Behavior characteristics
- Learning self-control
- Adventuring
- Motor development
- Cognitive/conceptual/intellectual/memory development
- Perceptual development
- Language development
- Intellectual development
- Personality and emotional development
- Play
- Social development
- Discrimination learning

3 to 5 Years:

- Increasing independence and activity
- Greater self-control
- Sex identity
- Intellectual development
- Cognitive/conceptual/intellectual/memory development
- Perceptual development
- Appearance of mental health problems

INTRODUCTION TO NORMAL CHILD DEVELOPMENT continued

- Motor skills
- Imitation--modeling

5 to 9 Years:

- Community contact
- Drive for mastery and independence
- Character development
- Intellectual development
- Competence development
- Love
- Individual and sex identity
- School and recreation

Preadolescence and Adolescence:

- Theories
- Stages
- Adult attitudes towards youth
- Striving for independence
- Intellectual development
- Social development
- Sex development and behavior
- Anxiety about physical development

INTRODUCTION TO NORMAL CHILD DEVELOPMENT continued

- Intellectual development
- Moral values
- Recent youth trends
- Alienated youth

1.5 1-1

PROBLEMS OF CHILDHOOD (1)

Outline of Course Content

Mental Retardation:

- Clinical features
- Diagnosis and differential diagnosis
- Prognosis, treatment
- Incidence
- Personality
- Etiology and pathology: genetic and other
- Rehabilitation
- Social adjustment
- Housing
- Attitude and behavior towards the mentally retarded
- Achievement expectations for the mentally retarded

PROBLEMS OF CHILDHOOD (1) continued

Emotional Disorders:

- Incidence
- Neuroses
- Psychoses
- Depression
- Sexual problems
- Enuresis
- Organicity
- Constitutional factors
- Autism
- Rehabilitation
- Reactions to life situations (family behavior patterns, cultural patterns)
- Social and economic stress

1.5 1-1

PROBLEMS OF CHILDHOOD (2)

Outline of Course Content

Behavior Disorders:

- Developmental concepts

PROBLEMS OF CHILDHOOD (2) continued

- Personality--character disorders
- Environment--socioeconomic factors
- Family character disorders
- Aggression
- Hyperactivity
- Adjustment reactions
- Self-destructive behaviors
- Classroom behaviors
- Communication
- Modeling
- Treatment/rehabilitation

Other Disorders:

- Sleep
- Food intake
- Toilet training
- Sexual development
- Speech
- Psychomotor, etc.
- School phobia

Antisocial Behavior:

- Genesis of antisocial behavior

PROBLEMS OF CHILDHOOD (2) continued

- Environment
- Family
- Adjustment
- Aggression
- Authority and controls
- Runaway
- Drug dependence and personality
- Personality

.75 1-1

CHILD HEALTH

Outline of Course Content

- Basic Physiology and neurology
- Basic nursing
- Introduction to pediatrics
- Body mechanics
- Physical care:
  - Hygiene
  - Medication including general use
  - Dosage
  - Adverse side effects

CHILD HEALTH continued

- First aid:
  - Signs of illness
  - Injuries
  - Seizures
  - Artificial respiration
  - Evacuation procedures
  - Swimming pool
- Nutrition
- Genetics

.75 1-1

METHODS OF CHILD CARE

Outline of Course Content

- Parental roles
- Effective parenting
- In home
- Day care centers, nursery schools, kindergartens
- Assessment and treatment planning
- Foster day care
- Foster family care

METHODS OF CHILD CARE continued

- Group residential care
- Family vs professional
- Boarding homes
- Reception homes
- Special classes

1.5 1-1

RECREATION-CRAFTS, ACTIVITY

Outline of Course Content

- Play theory
- Physical education and motor skill development programs
- Play programs
- Recreation programs, including camping
- Activity selection
- Activity leader
- Music education
- Industrial art education
- Art therapy
- Play therapy

RECREATION-CRAFTS, ACTIVITY continued

Types of Play:

- Drama
- Arts
- Crafts
- Water
- Games
- Storytelling
- Music
- Block and construction
- Hobbies

.75 1-1

RECORDS AND REPORTS

Outline of Course Content

- Objective data collection
- Subjective data collection
- Types of data to collect
- Daily records
- Files and indexing
- Baseline data

RECORDS AND REPORTS continued

- Use of charts, graphs
- Report writing

.75 1-1

CHILD DISCIPLINE AND MANAGEMENT

Outline of Course Content

- Rationale
- Types of authority
- The mature authority figure
- Conflict in authority relationships
- Authority in therapeutic relationships
- Controls
- Use of physical restraint
- Therapeutic value of controls
- Techniques and schedule
- Counter indications
- Inconsistent discipline
- Permissiveness
- Behavior modification in the classroom
- Behavior modification in social use
- Modeling

1.5 1-1

THE FAMILY

Outline of Course Content

- Family situations and the child
  - Family structure
  - Family process and the child
  - Family culture and the child
- Facets of family life
  - The emphatic complex and child behavior
  - Some nonfamily members: Their role in child development
- Modes of family operation
  - Family table talk
  - Family modes of expression
  - Family rituals and child development
  - Changing roles and functions of parents
- Class and status differentials
  - The child and the class structure
  - The individual child and his status
- Families under stress
  - Some problem families
  - Homes with conflict situations
- Extrafamily groups and child development
  - Growing out of the family

THE FAMILY continued

- Peer groups: preschool and later age
- School situations and child development
- Mass media and children's heroes

- The larger social setting for child development
  - Children as a population element
  - The status of childhood in society
  - Child rearing in the United States

YEAR 1 -- SEMESTER 2

1.5 1-2

GENERAL PSYCHOLOGY (B)

Outline of Course Content

-Topics as in introductory psychology textbooks

1.5 1-2

INTRODUCTION TO SOCIOLOGY AND ANTHROPOLOGY

Outline of Course Content

- Topics as in introductory sociology and anthropology textbooks

1.5 1-2

PROBLEMS OF CHILDHOOD (3)

Outline of Course Content

Disadvantaged:

- Facts about poverty
- Impact of poverty on mental health
- Nature vs nurture
- Cultural factors
- Factors associated with poverty

PROBLEMS OF CHILDHOOD (3) continued

- Cognitive/conceptual/intellectual development
- Perceptual development
- Social development
- Affective development
- Minority groups
- Ethnic surveys, case histories

Physically/Neurologically Handicapped:

- Family relations
- Personality and social adjustment
- Social attitudes towards physically/neurologically handicapped
- Psychological reactions to physical illness
- Blind
- Deaf
- Perceptually handicapped
- Cleft palates
- Epilepsy
- Learning disabilities
- Genetics
- Brain damage
- Cerebral dysfunctions
- Treatment/rehabilitation

PROBLEMS OF CHILDHOOD (3) continued

Treatment:

- Behavior modification--survey
- Special education programs--survey
- Psychiatric treatment--survey
- Modeling
- Rehabilitation

1.5 1-2

LEARNING DISABILITIES--ASSESSMENT AND REMEDIATION

Outline of Course Content

- Types of Disabilities:
  - Physical
  - Cognitive-perceptual-integrative
  - Language-speech
  - Reading
  - Visual
  - Auditory
  - Coordination
  - Sensory
  - Intelligence
  - Social

LEARNING DISABILITIES--ASSESSMENT AND REMEDIATION continued

- General theory
- Assessment type of d[illegible]
- Advice to parents
- Preschool programs
- Elementary school programs
- Behavior modification training techniques
- Language development training
- Cognitive/conceptual development training
- Reading programs
- Tactile--motor training
- Programing/Program planning and program evaluation

.75 1-2

BEHAVIOR TECHNIQUES/MANAGEMENT--THEORY

Outline of Course Content

- Ethics
- Behavior modification--theory
  - Reinforcement
  - Operant learning
  - Respondent learning

BEHAVIOR TECHNIQUES/MANAGEMENT--THEORY continued

- Contingency management and contracting
- Token economy
- Psychodynamic approach
- Psychodrama
- Other approaches

1.5 1-2

BEHAVIOR TECHNIQUES/MANAGEMENT--SPECIAL PROBLEM AREAS

Outline of Course Content

- Severe behavior disorders
- Nervous habits
- Emotional disorders
- Withdrawal
- Head banging
- Mentally gifted
- Rocking
- Family
- Tantrums
- Enuresis
- Toilet training
- Nonattending behavior

1.5 1-2

GROUP MANAGEMENT

Outline of Course Content

- Objectives
- Individual within group
- Formation of group
- Development of Group:
  - Climate
  - Playroom
  - Involvement
  - Interaction
  - Solidarity
- Group structure and effectiveness
- Group therapy
- Conflicts, choices
- Decision making
- Communication
- Facilitation
- Leadership
- Marathon groups
- Classroom behavior

1.5 1-2

COMMUNICATION--REPORTING AND RECORDING

Outline of Course Content

- Theory
- Relevancy
- Record keeping:
    - Type
    - Frequency of recording
- Report writing
- Report and record analysis

.75 1-2

HOUSEHOLD MANAGEMENT SKILLS

Outline of Course Content

- Nutrition
- Budgeting
- Planning
- Interior decoration
- Shopping:
    - Food
    - Clothes

HOUSEHOLD MANAGEMENT SKILLS continued

- Furnishings
- Financing:
  - Short-term loans
  - Credit card payments
  - Mortgages
  - Car loans
- Food preparation

YEAR 2 -- SEMESTER 1

1.5 2-1

CHILD PSYCHOLOGY/PSYCHIATRY (A)

Outline of Course Content

- Topics as in introductory child psychology/psychiatry textbooks

1.5 2-1

GROUP DYNAMICS (A)

Outline of Course Content

- Social psychologists' contributions
- Theories of group dynamics, models
- Contemporary group dynamics
- Modification of group atmosphere
- Newcomb and social anchorage of attitudes
- Sherif's experimental creation of the social norm
- Whyte's street-corner society
- Interpersonal relations
- Conformity
- Group therapy
- Group interaction
- Motivation
- Problem-solving behavior

1.5 2-1

PROBLEMS OF CHILDHOOD (4)

Outline of Course Content

Attitudes Towards Mental Illness and Mental Retardation:

- Rejection
- Overt hostility
- Neglect
- Perfectionism
- Overprotection
- Teacher's attitude
- Physician's attitude
- Hospital staff's attitude
- Family's attitude
- Community's attitude

Mental Disorders in Adolescents:

- General consideration and issues in classification
- Drug abuse
- Psychosomatic disorders
- Depression
- Suicide
- Obesity
- Derealization

PROBLEMS OF CHILDHOOD (4) continued

- Common stresses
- Learning disability
- Psychoses
- Neuroses
- Sexual
- Family patterns
- Family involvement
- Assessment
- Treatment:
    - Drugs
    - Group therapy
    - Behavior modification

1.5 2-1

ADOLESCENT PSYCHOLOGY

Outline of Course Content

- Development in middle childhood (6-12):
    - Physical development
    - Cognitive activities
    - Piaget's theory of intellectual development

ADOLESCENT PSYCHOLOGY continued

- Adjustment to school
- Relations with peers
- Relations with family
- Sex role identification
- Development of moral standards
- Psychological problems of middle childhood

- Development of adolescence:
  - Age of transition
  - Physical development
  - Transition in emotionality
  - Development in socialization and sexuality
    - Social influence: Black; feminine viewpoints
  - The adolescent and his family
  - Acting-out adolescent:
    - Sexual
    - Drugs
    - Delinquency
  - Psychoses in adolescence
  - Delinquency

1.5 2-1

EDUCATION PSYCHOLOGY/EDUCATION TECHNIQUES

Outline of Course Content

- School as social system
- Techniques of teaching
- Prescriptions for children
- Aggressive behavior in school
- Antisocial and opposition behavior
- Isolation, dominance, dependence, and sex
- Affective behavior
- Cognitive function:
    - Learning failures
    - Thought disturbances
- Integrative behavior and other personal disorders
- Mental retardation
- Low average intelligence
- General behavior
- Educational TV

1.5 2-1

NURSERY SCHOOL PROGRAM AND KINDERGARTEN PROGRAM

Outline of Course Content

- Teachers
- Rules
- Dramatic play
- Physical development
- Conflicts
- Routines
- Creative arts
- Music
- Language
- Stories
- Nature
- Motor skills development
- Discrimination learning
- Play
- Imitation/modeling
- Socioeconomic and cross-cultural factors
- Problems: hyperactivity, aggressiveness
- Classroom behavior
- Evaluation techniques

1.5 2-1

ENGLISH LANGUAGE AND CHILDREN'S LITERATURE (A)

Outline of Course Content

- Topics as appropriate

1.5 2-1

SPEECH AND LANGUAGE--ASSESSMENT AND INTERVENTION

Outline of Course Content

- Anatomy and physiology of the ear, second speech mechanism
- Nervous system
- Hearing, impairments, testing--diagnosis and treatment
- Articulation disorders--diagnosis and treatment--phonetics
- Voice disorders
- Speech disorders
- Language disorders
- Mental retardation
- Mental illness and verbal behavior
- Different methods and techniques of evaluation and treatments
- Different settings: individual, group, classroom, play
- Therapy, psychodrama, Black language, behavior modification and language

YEAR 2 -- SEMESTER 2

1.5 2-2

CHILD PSYCHOLOGY/PSYCHIATRY (B)

Outline of Course Content

- Topics as in introductory child psychology/psychiatry textbooks

1.5 2-2

GROUP DYNAMICS (B)

Outline of Course Content

- Introduction to group counseling
- Theoretical approaches
- Therapeutic forces in the group
- Leadership
- Organization
- Establishing and maintaining group
- Special problems in groups
- Group counseling with children
- Group dynamics in the classroom
- Parent and family group counseling
- Group leadership training
- Sensitivity training
- Delinquency, drugs, and group processes
- Marathon groups

1.5 2-2

THE PRESCHOOL CHILD

Outline of Course Content

Growth and Development:

- Daily routine
- Health supervision
- Diet
- Safety

Behavior:

- 1 year old
- 2 years old
- 3-6 years old
- Play and playmates
- Discipline
- Family members and structure

Potential Behavior Problems:

- Temper tantrums
- Nervous habits
- Late talking
- Stuttering

THE PRESCHOOL CHILD continued

Handicapped Child:

- Emotional/behavioral/intellectual disorders
- Blind
- Deaf
- Perceptual disorders
- Cleft palate
- Learning disabilities
- Sick child
- Parental roles, authority, and socioeconomic status, etc.
- Loss of parents
- Birth order
- Parental counseling
- Adjustment
- Family atmosphere
- Ethnic child-rearing patterns

1.5 2-2

PROBLEMS OF CHILDHOOD (5)

Outline of Course Content

Drug/Alcohol Addiction:

- Classification of drugs and effects
- Psychopathology of addiction
- Psychological characteristics of addicts
- Attitudes towards authority
- Ethnicity, sex, and length of use
- Social roles of addicts in subcultures
- Institutional treatment of juvenile addicts
- Withdrawal
- Treatment planning
- Group therapy with juvenile addicts
- Rehabilitation

Hospital and Hospitalization:

- Introduction: effects of hospitalization experience
- Parent's role
- Child's needs and staff
- Social, educational, and recreational programs
- Counseling and guidance programs
- Leadership and supervision

PROBLEMS OF CHILDHOOD (5) continued

- Interpersonal relations among staff
- Hospitals and community

1.5 2-2

CRISIS INTERVENTION

Outline of Course Content

- Crisis--grief
- Historical development of crisis intervention
- The crisis intervention unit--structure and function
- Emergency telephone services
- The process of crisis intervention
- Differentiation between psychotherapeutic techniques
- Group therapy concepts in crisis intervention
- Sociocultural factors affecting therapeutic intervention
- Problem-solving approach to crisis intervention
- Situational crisis (incidental)
- Maturational crisis (developmental)
- Family crisis

1.5 2-2

CHILDREN'S CLASSROOM INSTRUCTION

Outline of Course Content

- Introduction to school method:
    - Teacher responsibilities
    - Modern directions
    - Method
- Pupil study and diagnosis and techniques
- Organization of teaching materials
- Fostering communication and investigation
- Drill and routine
- Guiding and pacing learners
- Classroom behaviors
- Discipline
- Behavior modification, classroom use
- Evaluation methods, etc.
- Contingency management and contracting
- Special classes
- Play
- Kindergarten programs
- Elementary school programs
- High school programs

CHILDREN'S CLASSROOM INSTRUCTION continued

- P.E. and motor skill development programs
- Language development training
- Reading programs
- Special education
- Perceptually handicapped
- Physically handicapped
- Social adjustment, interaction
- Sex education
- Adolescents and education
- Preschool education
- Specific skill programs
- Head Start disadvantaged

1.5 2-2

ENGLISH LANGUAGE AND LITERATURE

FOR PREADOLESCENTS AND ADOLESCENTS (B)

Outline of Course Content

- Topics as appropriate

1.5 2-2

THE JUVENILE AND THE JUSTICE SYSTEM

Outline of Course Content

- History of child welfare
- Interrelationship of the correctional worker
- The offender and the legal staff
- Patterns of collaboration between psychiatry/psychology and the Juvenile Court
- Use of compulsory psychotherapy
- Problems of police work with delinquents
- Child care specialists in probation agencies
- Delinquents' attitudes towards the law and authority
- Social status and the law
- Family involvement
- Family patterns
- Runaway
- Drug dependence
- Group organization, process, leadership

BACHELOR DEGREE

YEAR 3 -- SEMESTER 1

1.5 3-1

INTRODUCTORY BIOLOGY (A)

Outline of Course Content

- Topics as in introductory biology textbooks

1.5 3-1

PERSONALITY (A)

Outline of Course Content

- Self-concept
- Psychoanalytic theory of personality
- Analytical theory of personality
- Individual theory of personality
- Sociometric approach to personality
- Sociological School of Neo-Freudian

1.5 3-1

CHILD DEVELOPMENT TREATMENT AND SERVICES

Outline of Course Content

This course exposes students to various treatment programs, methods, and services to children both within and outside of various institutional and clinical settings.

CHILD DEVELOPMENT TREATMENT AND SERVICES continued

Topics:

- Child or Small Adult
- Child Development
- Satellite Homes--Parent Education
- Family Relationships
- Sand Tray--Jungian Approach
- Parent-Child Center Program
- The Minority Child
- Identity Formation in the Black Child
- Zen Buddhism--Self-awareness
- Civil Rights in a Health Care Facility
- Psychodrama in Understanding Termination with Children
- Education for Parenthood
- What Is a Child Mental Health Specialist?
- Dance and Music Therapy with Children
- Developmental Skills Training
- Play Therapy
- Panel on Programs for Sexual Deviation Problems--Rights of Gay Minors
- Infant Stimulation I
- Infant Stimulation II
- Family Therapy

CHILD DEVELOPMENT TREATMENT AND SERVICES continued

- Parent Effectiveness Training
- Art as Expression for Children
- Conjoint Family Therapy

1.5 3-1

LEARNING DISABILITIES (A)

Outline of Course Content

- Specific learning disabilities:
  - Sensory handicapped and brain damaged
  - Low average intelligence
  - Coordination
- General behavior
- Cognitive/conceptual/memory
- Motor skills
- Discrimination learning
- Classroom behavior
- Advice to parents
- Assessment evaluation
- Incidence studies, case histories
- Programing, program evaluation

LEARNING DISABILITIES (A) continued

- Creative art therapy
- Tactile perception training
- Visual motor training

1.5 3-1

FAMILY (A)

Outline of Course Content

- Biological foundations
- Social recognition of family unit
- Social and other processes in family formation
- Marital patterns
- Marital adjustment
- Family adjustment
- Parents and child
- Birth order
- Parental authority/roles
- Family atmosphere
- Family and larger kin groups
- Family and other role behavior interplay

1.5 3-1

PHILOSOPHY AND RELIGION

Outline of Course Content

- Topics as in "survey" textbooks

.75 3-1

COMMUNITY

Outline of Course Content

- Theory and sociology of community
- Organization:
    - Family bonds
    - Tradition
    - Ties of friendship
    - Structures of conflict
    - Ethnic relations and subcommunities
    - Political-economic structures
- Population movements and fate of local community
- Socioeconomic factors
- Attitudes of community leaders
- Community policies, planning
- Transportation in community

COMMUNITY continued

- Police-community relations
- Attitude and personality of field-workers
- Continuing education
- Vocational training program

.75 3-1

COMMUNITY RESOURCES

Outline of Course Content

- Preschool programs
- Volunteer societies and their use
- Elementary school programs
- Local departments of health
- Physical education and motor skill development programs
- Community council information services
- Community resources directory/information center
- Religion affiliated resources
- Volunteer organizations/services
- Homemaker--home health aides
- Recreation programs
- Visiting nurse services

COMMUNITY RESOURCES continued

- Crisis services
- Speech therapists
- Day care services
- Physiotherapists
- Comprehensive, collaborative services
- Medical/dental/university services
- Fraternal health services
- Welfare programs
- Legal aid
- Probation Department
- Attitude and personality of field-workers

1.5 3-1

THE DEPENDENT CHILD--SOCIAL WORK

Outline of Course Content

- Social welfare from an historical perspective:
  - Trends in U.S. welfare philosophy
    - Landmark events
    - Themes running through our history
  - Emergence of social work

THE DEPENDENT CHILD--SOCIAL WORK continued

- Child welfare services:
    - A.F.D.C.--Social Security
    - Protective services
    - Placement
    - Adoptions
- Social work services to children in residential placement:
    - Intake procedures
        - Student to participate on an intake
    - Services to families
        - What to look for in families:
            - communication, relationships, values, socioeconomic variables
        - Social worker's role
    - Agency or placement field trip
        - To be planned with students
    - Placement
        - Student to work on placing specific children
- Other social work roles
- Possible roles of Child Mental Health Specialists with social worker

1.5 3-1

CRISIS INTERVENTION

Outline of Course Content

- Nature of a crisis situation and its causes
- Different techniques for different cases
- Suicide prevention/intervention
- Crisis intervention
- Role of the interviewer

YEAR 3 -- SEMESTER 2

1.5 3-2

INTRODUCTORY BIOLOGY (B)

Outline of Course Content

- Topics as in introductory biology textbooks

1.5 3-2

PERSONALITY (B)

Outline of Course Content

- Self-actualization
- Factor theory of personality
- Stimulus-response theory of personality
- Phenomenological theory of personality
- Rogers' self theory of personality
- Existential psychology
- Personality assessment

1.5 3-2

FAMILY (B)

Outline of Course Content

- Interaction between families and social factors in social change
- Family's attitude towards mental illness, mental retardation
- Ethnic child-rearing patterns
- Family/environmental problems
- Antisocial family patterns, including alcohol, drugs, violence
- Family dissolution
- Loss of parents
- Family counseling

1.5 3-2

LEARNING DISABILITIES (B)

Outline of Course Content

- Specific learning disabilities
  - Auditory modality problems
  - Visual modality problems
- General behavior
- Cognitive/conceptual/memory
- Motor skills

LEARNING DISABILITIES (B) continued

- Discrimination learning
- Classroom behavior
- Advice to parents
- Assessment evaluation
- Incidence studies, case histories
- Programing, program evaluation
- Creative art therapy
- Auditory perception training
- Visual perception training

1.5 3-2

WORKING WITH PARENTS OF DISTURBED CHILDREN

Outline of Course Content

- Parental influence in child disturbances
- Parental expectations
- Assessing parental attitudes, personality
- Parents with emotional disorders
- Problem families, antisocial behavior
- Parents under unmanageable stress
- Interfamily relationships

WORKING WITH PARENTS OF DISTURBED CHILDREN continued

- Therapy programs involving parents and the child:
  - Educating the parent of the emotionally disturbed child
  - Programs to assist parents
  - Working with hostile parents
  - Family versus professional child care
  - Foster care programs
  - Foster parents
  - Ethnic child-rearing patterns

1.5 3-2

BEHAVIOR THERAPY

Outline of Course Content

- History (from lab to clinic)
- Behavior modification concepts
- Token economy
- Contingency management and contracting
- Behavior approaches to mental retardates
- Modification of psychotic behavior
- Modification of antisocial behavior
- Behavioral approaches to school and mild conduct problems

BEHAVIOR THERAPY continued

- Modification of behavioral disorders
- Modification of special problems
- Social use of behavior modification
- Modification training techniques of the childhood disadvantaged

1.5 3-2

INTRODUCTION TO STAFF AND DIAGNOSTIC CONFERENCE

Outline of Course Content

- As in applied training facility

1.5 3-2

JUVENILE DELINQUENCY--PROBATION

Outline of Course Content

Course Objectives:

- To provide a participatory experience in the field of juvenile justice
- To provide an understanding via psychological, sociological, criminological family systems concepts of the nature and extent of juvenile delinquency
- To provide an understanding of the Juvenile Justice System

JUVENILE DELINQUENCY--PROBATION continued

- To provide an understanding of the law and the child
- To provide understanding of community resources available to children in trouble
- To provide an understanding of placement and its use with children
- To provide an opportunity for the students to begin a professional role definition as Child Mental Health Specialists in the field of juvenile justice and treatment

YEAR 4 -- SEMESTER 1

CONTEMPORARY SYSTEMS AND THEORIES

Outline of Course Content

- Scientific method and school of psychology
- Sensation
- Perception, classical
- Perception, contemporary
- Learning I: Classical
- Learning II: Miniature systems
- Learning III: Derivative theories and current issues
- Learning IV: Verbal
- Thinking and language
- Motivation
- Feeling and emotion
- Physiological theories of behavior
- Quantitative psychology
- Personality
- Social psychology

1.5 4-1

ADVANCED CHILD GROWTH AND DEVELOPMENT I

Outline of Course Content

- Development--maturation:
  - Concept of development:
    - The meaning of development
    - Phases of development
    - Theories of developmental psychology
    - Uses of developmental psychology
  - Mechanisms of development:
    - Biological factors
    - Sociocultural factors
    - Individual variation and sociocultural norms
    - Mechanisms of learning
    - Complex manifestations of learning
    - Overview of mechanism
- Prenatal development:
  - Historical perspective
  - Genetic perspective
  - Research on prenatal behavior
- Neonate:
  - Birth experience
  - Characteristics

ADVANCED CHILD GROWTH AND DEVELOPMENT I continued

- Reflexes

- Motor development--neonate to eight years:
  - Gesell
  - Behaviorism
  - Piaget
  - Gross motor
  - Motor generalizations--Kephart
  - Fine motor
  - Sensorimotor

- Perceptual development:
  - Nervous system
  - Problem areas
  - Feedback system
  - Research
  - Visual
  - Auditory
  - Tactile

- Body image:
  - Definitions
  - Norms

- Social-emotional development

1.5 4-1

COUNSELING: INTERVIEWING (A)

Outline of Course Content

- Basic concepts in interviewing
- Structuring of the interview situation
- General technical considerations
- Early stages of the interview
- Detailed inquiry
- Interview as a process
- Developmental history as a frame of reference
- Termination of the interview

1.5 4-1

FAMILY RELATIONS

Outline of Course Content

- Methodological issues in family interaction
- Studies of individual family members
- Studies of family interaction:
  - Decision making
  - Feelings
  - Attitudes

FAMILY RELATIONS continued

- Power
- Behavior
- Intrafamily communication
- Parent effectiveness

1.5 4-1

RESIDENTIAL PROGRAMS

Outline of Course Content

- Psychotherapy and residential treatment
- Elements and structure of therapeutic milieu
- Educational component of residential treatment centers
- Organization, communication, and structure
- Child care worker
- The family and the treatment center
- Surrogate family
- Group home
- Wilderness camping
- Outward-bound program
- Treatment program planning

1.5 4-1

PSYCHOSOCIAL STUDIES OF THE MINORITY CHILD

Outline of Course Content

Purpose:

The purpose of this course is to integrate into the curriculum a condensed component which treats the topic of human culture as a psychological model. Advanced information specific to different cultures will be presented. The major emphasis of this course will be as follows:

- Personality and behavior at the individual level among minority groups
- The process of socialization in minority groups
- A clinical interpretation of specific psychological and social patterns which are manifested at both the individual and group levels among these cultures

Course Content:

- Personality:
  - Variations of parent-child interaction within each culture
  - Child-rearing practices
  - The development of personal and social roles in the child
- Social patterns:
  - Sociocultural influences on the development of cognitive styles
  - Language and communication
  - Group identity and interaction processes
- Interaction with dominant society:
  - The marginal man concept and emotional adjustment

PSYCHOSOCIAL STUDIES OF THE MINORITY CHILD continued

- Current social trends

- Practical implications:

  - Implications for use of course content in educational and professional treatment settings

YEAR 4 -- SEMESTER 2

1.5 4-2

EXPERIMENTAL PSYCHOLOGY

Outline of Course Content

- Topics as in introductory experimental psychology textbooks

1.5 4-2

CLINICAL ASPECTS OF THE MINORITY CHILD'S WORLD

Outline of Course Content

Course Objectives:

- To prepare the students to work with minority children and their parents in the areas of special education, public social service, and psychiatric treatment settings
- To acquaint the student with some general issues with respect to the management and treatment of minority children and their parents in professional settings
- To acquaint the students with the need for an applied ethnic studies component in human services training programs
- To enhance the students' communication skills with minority group clients

Course Content:

- The need for selected training components on minority groups in human services training programs
- The minority in historical perspective

CLINICAL ASPECTS OF THE MINORITY CHILD'S WORLD continued

- Social service agencies and the minority client
- The minority child and his family
- The delivery of professional services to minority children and some surrounding professional issues
- The concept of mental illness and intellectual deficiency in minority children
- The minority child in educational settings
- The minority child in mental health settings
- Communicating with minority clients
- Basic communication skills for students who deal with minority clients
- Counseling and working with minority parents
- The issue of psychological testing and psychiatric diagnosis
- Practical application of course content

1.5 4-2

COUNSELING (B)

Outline of Course Content

- Philosophical base
- Contemporary theories of counseling and techniques
- Religion as related to counseling
- Rational-emotive psychotherapy

COUNSELING (B) continued

- The self-concept in counseling
- Marital/family counseling
- Confrontation counseling
- Adjustment/personal/social counseling
- Educational counseling

1.5 4-2

FAMILY THERAPY

Outline of Course Content

- Theory of relations:
  - Experience and transaction
- Intensive family therapy as process
- Rationale and techniques
- In hospital and private practice
- Indicators and counterindicators for exploratory family therapy
- Family patterns
- Family involvement
- Family relations
- Identification struggles
- Family crises, intervention

FAMILY THERAPY continued

- Supportive family therapy
- Case studies
- Assessment

1.5 4-2

ADVANCED CHILD GROWTH AND DEVELOPMENT II

Outline of Course Content

- Development in middle childhood (6-12):
  - Physical development
  - Cognitive activities
  - Piaget's theory of intellectual development
  - Adjustment to school
  - Relations with peers
  - Relations with family
  - Sex role identification
  - Development of moral standards
  - Psychological problems of middle childhood
- Development of adolescence:
  - Age of transition
  - Physical development

ADVANCED CHILD GROWTH AND DEVELOPMENT II continued

- Transition in emotionality
- Development in socialization and sexuality
    - Social influence: Black; feminine viewpoints
- The adolescent and his family
- Acting-out adolescent:
    - Sexual
    - Drugs
    - Delinquency
- Psychoses in adolescence
- Delinquency

MASTER DEGREE

OPTION I

YEAR 5 -- SEMESTER 1

1.5 5-1

CRISIS INTERVENTION

Outline of Course Content

- Crisis--grief
- Historical development of crisis intervention
- The crisis intervention unit--structure and function
- Emergency telephone service
- The process of crisis intervention
- Differentiation between psychotherapeutic techniques
- Group therapy concepts in crisis intervention
- Sociocultural factors affecting therapeutic intervention
- Problem-solving approach to crisis intervention
- Situational crisis (incidental)
- Maturational crisis (developmental)
- Family crisis

.75 5-1

BASIC LIFE SCIENCE

Outline of Course Content

- Relevant medical terminology
- The functional aspects of the central nervous system

BASIC LIFE SCIENCE continued)

- The physiology of the central nervous system
- Biochemistry
- Endocrine system
- Reproductive system

.75 5-1

BASIC PHARMACOLOGY

Outline of Course Content

- Names, sources, active constituents, and pharmaceutical preparation of drugs
- Action of drugs, sites of action, and factors which modify the action of drugs
- Psychotropic drugs
- Autonomic drugs

1.5 5-1

CLINICAL SCIENCES AND TECHNIQUES

Outline of Course Content

- Medical techniques
- Psychological techniques

CLINICAL SCIENCES AND TECHNIQUES continued

- Cues, evaluation
- Psychological assessment: tests
- Interpretation and communication of assessment information
- Interviews: interpretation

1.5 5-1

SYSTEM THEORIES

Outline of Course Content

- Topics as in advanced systems theories textbooks and journal articles including understanding intrapsychic and interpersonal processes, intrapsychic and intrapersonal and professional development, sensitivity training, psychodrama, group therapy, family therapy, role playing, psychodynamics of family and group living, and psychodynamics of child development

YEAR 5 -- SEMESTER 2

1.5 5-2

TREATMENT PLANNING

Outline of Course Content

- Identification of relevent problems in life space:
  - Family, peers, education/occupation, community in general, physiological/neurological/genetic, personality including attitudes, overt behavior
- Planning of appropriate solutions for problems in life space
- Methods of treatment implementation
- Utilization of areas of strength of client
- Definition of expected time of implementation of each treatment procedure
- Communication procedure for discussion of treatment goal procedure with client
- Communication procedure for discussion of treatment goal procedure with family of client
- Communication procedure of treatment goal implementation with staff
- Progress review procedures

1.5 5-2

COUNSELING-INTERVIEWING/CRISIS INTERVENTION

Outline of Course Content

- Application of counseling-interviewing and crisis intervention techniques in different situations

3.0 5-2

BEHAVIOR MANAGEMENT--SPECIAL PROBLEM AREAS

Outline of Course Content

- Autism and childhood psychosis
- Brain damage
- Perceptual difficulties
- Problems in family:
  - Lack of family life
  - Communication difficulties
  - Marital problems
  - Alcoholism
  - Single parent
- Juvenile delinquency and acting out

3.0 5-2

PROGRAM ADMINISTRATION

Outline of Course Content

- Public management/administration:
  - Theory
  - Practical exposure
  - Organization structure

PROGRAM ADMINISTRATION continued

- Emphasis in education and human services fields
- Executive board relationship
- Staff development/motivation

- Grantsmanship:
  - Awareness of various grant proposal formats
  - New federation plan
  - Proposal writing
  - Funding source in clinical setting
- Supervision:
  - Theory
  - Practical exposure
  - Self-evaluation
  - Use of volunteers
- Policy formation/analysis:
  - Awareness of various policy issues and measures
  - Decision-making process
- Job preparation/resume
- Organization and administration of department
- Personnel:
  - Functions and qualifications
- Interdepartmental relations
- Administrative policies and measure for providing service

PROGRAM ADMINISTRATION continued

- Unit administration
- Personnel practices
- Budget and cost accounting
- Records, reports, and other administrative duties
- Physical facilities, equipment and supplies

MASTER DEGREE

OPTION II

YEAR 5 -- SEMESTER 1

3.0 5-1

LEARNING DISABILITIES I:

READING PROCEDURES ASSESSMENT AND REMEDIATION

Outline of Course Content

The purpose of this course is to develop the skills necessary for diagnosing specific reading problems through the use of various tests. It also includes interpretation of results and the choice of appropriate corrective materials and techniques including:

- Wide Range Achievement Test
- Gray Oral Reading Test
- Gilmore Oral Reading Test
- Spache Diagnostic Reading Scales
- Stanford Reading Achievement Test
- Nelson & Nelson-Denny Reading Test
- New Developmental Bond Test
- Several other related tests

3.0 5-1

LEARNING DISABILITIES II:

MATH PROCEDURES ASSESSMENT AND REMEDIATION

Outline of Course Content

- To be able to discern a child's stage of development as a basis for determining the type of math for which he is ready

LEARNING DISABILITIES II:

MATH PROCEDURES ASSESSMENT AND REMEDIATION continued

- To be able to provide concrete methods for the teacher in the teaching of mathematics
- To be able to understand how children learn math (not how to teach math)
- To be able to make laboratory materials that can be used as teaching aids
- To be able for each student to compile a "Resource Notebook" of practical lesson plans and specific diagnostic techniques that are relevant for the LD child
- To be able to be aware of and gain insight from the reading of articles of current literature and research from magazines and research bulletins
- To be able to pull together for the student via discussion, sharing of ideas and papers, his prior background, and this present math-related experience

3.0 5-1

METHODS OF MULTICULTURAL EDUCATION

Outline of Course Content

Course Objectives:

- To develop an understanding of the philosophy of multicultural education
- To develop a working knowledge of the different approaches to teaching multiculture in the elementary classroom
- To develop an understanding of multiculture educational materials and resources for different grade levels

METHODS OF MULTICULTURAL EDUCATION continued

- To acquire skills in developing and implementing workable muiti-cultural curriculum modules
- To develop an understanding of techniques and procedures for integrating multiculture into the established curriculum such as reading and science
- To develop an understanding of the problems inherent in teaching multicultural education in the classroom curriculum

Course Content:

- Philosophical basis for multicultural education
- Problems in teaching multiculture in the elementary classroom curriculum
- Approaches to multicultural education in the special education classroom
- Approaches to multicultural education in the general elementary classroom
- Types of multicultural education curricula and strategies of teaching
- Teaching multiculture in the reading curriculum
- Teaching multiculture in the social studies curriculum
- Teaching multiculture in the science and math curriculum
- Teaching multiculture as separate modules
- Multicultural resources for the elementary classroom
- Procedures for integrating living experiences of the community into the classroom curriculum
- Techniques for managing cultural misunderstanding and negative attitudes

4.0 5-1

DIAGNOSTIC TESTING

Outline of Course Content

- Introduction to testing:
  - Justification for, interpretations of, dangers of, alternatives to
  - Kinds of tests:
    - Intelligence tests
    - Sensory discrimination tests
    - Motor tests
    - Personality tests
    - Achievement tests
    - Aptitude tests
  - Testing formats:
    - Group vs. individual
    - Written vs. oral
    - Straightforward vs. disguised purpose
  - Testing techniques and procedures:
    - Establishing rapport
    - Control of all extraneous stimuli
    - Reinforce for performance but not for correct response
    - Watch feedback to subject

DIAGNOSTIC TESTING continued

- Important terms in testing:
  - Norms
  - Standardization
  - Standard deviation
  - IQ
  - Percentile
  - Reliability
  - Error of measurement
  - Content validity
  - Face validity
  - Criterion-related validity
  - Construct validity
- Intelligence tests:
  - History
  - Discussion and demonstration of the WISC, including profile analysis
  - Discussion and demonstration of the Leiter, the Stanford-Binet, and the Goodenough Draw-a-Man Test
  - Criticism and comparison of the IQ tests discussed; situations which indicate the use of a particular test
- Psychological tests--guest lecturer:
  - Overview of psychological testing
  - Test demonstrations and examples from case histories

DIAGNOSTIC TESTING continued

- Sentence completion, Bender-Gestalt, TAT, MMPI, projective drawing, WISC, and Rorschach

- Language tests:

  - Discussion of the ITPA-Theoretical Model and demonstration of the test

  - Peabody Picture Vocabulary Test--demonstration and interpretation

- Perceptual tests:

  - Discussion of perception

  - Presentation of the Frostig Developmental Test of Visual Perception; skills tested and their behavioral correlates

  - Discussion of auditory perceptual tests

- Academic tests:

  - General tests:

    - WRAT

    - CTBS

    - PIAT

  - Reading tests:

    - Spache

    - Gilmore Oral

    - Loyola

    - Silveroli

    - Dolch Basic Sign Word Tests

    - Gates-MacGinitie Reading Readiness Test

DIAGNOSTIC TESTING continued

- Math diagnostic tests:
  - Key math and informal procedures
- Other tests used by classroom teachers:
  - Valett and Frostig Movement Skills Test

- Remediation:
  - Teacher-made materials
  - Commercially produced materails
  - Use of remediation materials in individual educational therapy and in the classroom

YEAR 5 -- SEMESTER 2

LANGUAGE AND SPEECH DEVELOPMENT AND DISORDERS

Outline of Course Content

- Basis of speech, language and hearing:
    - Neuro-anatomical
    - Psycho-social
- Speech, language, and hearing development ("normal")
- Speech, language, and hearing development (deficits):
    - Etiology--diagnosis
    - Course of deficit--prognosis
    - Therapeutic intervention
- Anticipated skills to be learned:
    - Understanding of the field in general, normal speech, language, and hearing development and deficits found. This will enable the student to integrate speech, language, and hearing principles into the classroom or therapy situation. It will enable the student to recognize speech, language, and hearing deficits which may be responsible for or compounding other educational/therapeutic problems.
- Topics for lecture and discussion:
    - Speech and language structures:
        - Neurological structures:
            - CNS description
            - CNS operation
        - Anatomical description of:

LANGUAGE AND SPEECH DEVELOPMENT AND DISORDERS continued

- hearing mechanism
- speech mechanism

- Normal speech and language development:
  - Overview of various theories
  - Receptive (cognitive) language development
  - Expressive language development:
    - Phonemic
    - Linguistic
- Disorders of communication
  - Language dysfunction (and diagnosis)
  - Hearing dysfunction (and diagnosis)
  - Speech dysfunction (and diagnosis)

3.0 5-2

BEHAVIOR MODIFICATION TECHNIQUES FOR MULTIPLE HANDICAPPED, EMOTIONALLY DISTURBED, AND AUTISTIC CHILDREN

Outline of Course Content

- Behavior modification compared to other modes
- Respondent--operant conditioning
- Methods to increase behavior:

BEHAVIOR MODIFICATION TECHNIQUES FOR MULTIPLE HANDICAPPED EMOTIONALLY DISTURBED, AND AUTISTIC CHILDREN continued

- Positive reinforcement
- Negative reinforcement
- Avoidance
- Modeling

- Methods to decrease behavior:
  - Aversive conditioning
  - Time-out
  - Negative practice
  - Satiation
  - Condition incompatible response

- Schedules of reinforcement--acquisiton and maintenance
- Self-control
- Engineered classroom
- Token economy

3.0 5-2

ORGANIC AND CULTURAL BASIS FOR SEVERELY HANDICAPPED

Outline of Course Content

- Introduction
  - Review of neurophysiology

ORGANIC AND CULTURAL BASIS FOR SEVERELY HANDICAPPED continued

- Theories of CNS function:
    - Mass action
    - Specific action
    - Sensory-motor dichotomy
    - Sensory-integrative-motor trichotomy
- Disturbances of CNS function: intellectual impairment and deterioration:
    - Relation to mental deficiency
        - General versus specific
    - Relation to perceptual-motor handicaps
    - The Babcock Hypothesis
    - Brain injury
- Language disorders:
    - The five aphasias (pragmatic, semantic, syntactic, jargon, global)
    - Agnosia
    - Apraxia (verbal, dysarthrias)
        - Organic basis
        - Sociocultural context
        - Remediation and prescription
- Hyperkinesis: a nosological entity:
    - Relation to teaching methods and curriculum design
    - Cross-cultural variants

ORGANIC AND CULTURAL BASIS FOR SEVERELY HANDICAPPED continued

- Mental retardation:
    - Organic basis
    - Sociocultural context
    - Educational and psychological intervention
- The epilepsies:
    - Organic basis
    - Psychosocial aspects
    - Educational, psychological, and medical intervention

3.0 5-2

DIAGNOSTIC AND PRESCRIPTIVE TEACHING OF READING

Outline of Course Content

- The reading process
    - Recognition
    - Comprehension
- Language and thought (symbol formation and concept formation)
    - Importance of language
    - Theories of symbol formation
    - Relationship to cognition
    - Theories of learning development

DIAGNOSTIC AND PRESCRIPTIVE TEACHING OF READING continued

- Sensory mechanism
    - Brain
    - Vision
    - Hearing
- Perception
    - Definitions and interdependence with other functions
    - Relationship to reading
- Ego development
    - Relationship to reading
- Approaches to beginning reading
    - Phonemic
    - Linguistic
    - Language-acts
    - Language-experience
    - Sound-symbol
    - Individualized
    - Early reading
    - Perceptual-discrimination
- Objectives
    - The abilities to carry out a prescriptive program which meets the needs of all pupils
    - Skills in the administration of several screening tests and inventories

DIAGNOSTIC AND PRESCRIPTIVE TEACHING OF READING continued

- Classroom reading inventory
- The Botel reading inventory
- Frostig test

- An understanding of the role of perceptual processes as applied to reading
- The abilities to plan realistic objectives which meet the needs of all pupils

- Procedures
  - Lecture: presentation of background material
  - Demonstration of test administration
  - Practice in administration of screening and inventory tests
  - Discussion of problems involved
  - Display and explanation of methods
  - Reading systems: The Writing Road to Reading, Distar, S.R.A., Lippencott, Montessori, Individualized Reading, Frostig, Michigan Language Program, Phonovisual, Sullivan, Reading with Phonics, Basic Reading, Carden Method and Words in Color

2.0 5-2

LEARNING DISABILITIES III: MOTOR-PERCEPTUAL PROCEDURES

Outline of Course Content

Course Objectives:

To acquaint the students with developmental literature, assessment techniques, and remediation procedures in motoric and perceptual functioning in working with the exceptional child.

Topics:

- Reflexes
    - (see videotape, handouts, use texts: Ayres or Fiorentine, etc.)
- Gross motor
    - (remember generalizations, A&P, Purdue, etc.)
- Fine motor
- Ocular control
- Tactile-kinesthetic
- Vestibular-equilibrium
- Intra- and intermodal transfer
    - (V-V, A-V, T-K-V, T-K-A)
- Auditory
    - Discrimination: gross sounds, speech sounds, words
      sequencing, blending, closure
- Visual

LEARNING DISABILITIES III: MOTOR-PERCEPTUAL PROCEDURES continued

- Discrimination: shape, color, letters, words sequencing, memory, Frostig, ITPA
- Conceptualization
  - Sort, match to sample, same-different, conservation
- Body image
- Spatial relations--Frostig
- Body in space
- Reproduction graphics: lines, forms, letters, words
- Dominance: laterality, directionality, bilaterality
- Attention

2.0 5-2

THE SEVERELY DISTURBED ADOLESCENT

Outline of Course Content

- Development in middle childhood (6-12):
  - Physical development
  - Cognitive activities
  - Piaget's theory of intellectual development
  - Adjustment to school
  - Relations with peers
  - Relations with family

LEARNING DISABILITIES III: MOTOR-PERCEPTUAL PROCEDURES continued

- Sex role identification
- Development of moral standards
- Psychological problems of middle childhood

- Development of adolescence:
  - Age of transition
  - Physical development
  - Transition in emotionality
  - Development in socialization and sexuality
    - Social influence: Black; feminine viewpoints
  - The adolescent and his family
  - Acting-out adolescent:
    - Sexual
    - Drugs
    - Delinquency
  - Psychoses in adolescence
  - Delinquency

YEAR 6 -- SEMESTER 1

3.0 6-1

COUNSELING EXCEPTIONAL CHILDREN AND PARENTS

(INDIVIDUAL AND GROUP)

Outline of Course Content

- Counseling vs. psychotherapy
- Role of the therapist
- Individual vs. group psychotherapy
- Group psychotherapy
    - Composition/group process
    - Selection of clients
    - Group recording
- Various group methods
- Socioanalysis
    - Psychodrama
    - Role training
- Adjunctive treatment methodology
- Classroom group management
- Diagnostic groupings
- Personal awareness
- Termination

3.0 6-1

PSYCHOLOGY OF THE EXCEPTIONAL CHILD

(PSYCHOPATHOLOGY OF CHILDHOOD)

Outline of Course Content

- Normal behavior
- Incidence and prevalence of each type--and historical perspective
- Mental retardation
- Juvenile delinquency
- Neurosis
- Psychosis
- Schizophrenia
- Early infantile autism
- Topics for lectures and discussion:
    - Normal vs. abnormal
    - Basic personality theory
    - Mental retardation
    - Neurosis
    - Diagnostic nomenclature
    - Feeding problems
    - Toilet training problems
    - Psychosis
    - Childhood schizophrenia

PSYCHOLOGY OF THE EXCEPTIONAL CHILD

(PSYCHOPATHOLOGY OF CHILDHOOD) continued

- Topics for lectures and discussion: continued
  - Early infantile autism
  - School phobia
  - Juvenile delinquency
  - Treatment and prevention
  - Diagnostic procedures

3.0 6-1

STATISTICS

Outline of Course Content

- Topics as in introductory statistics textbooks

3.0 6-1

THE DEPENDENT CHILD--SOCIAL WORK

Outline of Course Content

- Social welfare from an historical perspective:
  - Trends in U.S. welfare philosophy

THE DEPENDENT CHILD--SOCIAL WORK continued

- Landmark events
- Themes running through our history

- Emergence of social work

- Child welfare services:
  - A.F.D.C.--Social Security
  - Protective services
  - Placement
  - Adoptions

- Social work services to children in residential placement:
  - Intake procedures
    - Student to participate on an intake
  - Services to families
    - What to look for in families:
      - communication, relationships, values, socioeconomic variables
    - Social worker's role
  - Agency or placement field trip
    - To be planned with students
  - Placement
    - Student to work on placing specific children

- Other social work roles

- Possible roles of Child Mental Health Specialists with social worker

3.0 6-1

JUVENILE DELINQUENCY--PROBATION

Outline of Course Content

Course Objectives:

- To provide a participatory experience in the field of juvenile justice
- To provide an understanding via psychological, sociological, and criminological family systems concept of the nature and extent of juvenile delinquency
- To provide an understanding of the Juvenile Justice System
- To provide an understanding of the law and the child
- To provide an understanding of community resources available to children in trouble
- To provide an understanding of placement and its use with children
- To provide an opportunity for the students to begin a professional role definition as Child Mental Health Specialists in the field of juvenile justice and treatment

YEAR 6 -- SEMESTER 2

3.0 6-2

TECHNIQUES OF TEACHING THE SEVERELY HANDICAPPED AND WORKING WITH THEIR PARENTS (PLAY THERAPY)

Outline of Course Content

- Topics as appropriate

3.0 6-2

LEARNING CHARACTERISTICS OF THE DEVELOPMENTALLY DISABLED

Outline of Course Content

Description:

- Standardized materials used with exceptional children at the pre-academic and prevocational levels; developmental sequence in both skills and tasks; identification of the different modalities used in learning and their relationships to the deficits of children with learning disabilities; basic teaching skills such as shaping, fading, and reinforcement techniques are examined.

Clinical Expectations:

- Acquaint the student with materials and techniques to work with the learning disabled and emotionally disturbed child and adolescent
- To facilitate the construction of materials for specific learning problems and to implement their usage

LEARNING CHARACTERISTICS OF THE DEVELOPMENTALLY DISABLED continued

Topics for Lecture and Discussion:

- Areas of learning
- Modal learning
- Basic skills
- Shaping-fading-reinforcement
- Discrimination tasks
- Labeling
- Gross motor
- Fine motor
- Visual
- Auditory
- Conservation
- Original materials

CLINICAL CURRICULUM

1. CLINICAL AND EDUCATIONAL ROTATION DIRECTORY

ASSOCIATE OF ARTS DEGREE

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment for Young Children

Cottage Milieu

Population:

Young boys and girls, ages three to eight, mostly autistic.

Learning Experience:

- Participation in cottage activities
- Preschool program and kindergarten
- Motor-perceptual development
- Sign language
- Speech and language
- Self-care skills
- Responsibility to coordinator of total program for one child, including parents and community
- Participation in team meetings
- Monthly report on child
- Behavior modification training
- Reflect and record one's feelings and reactions during and following work with psychotic child
- Describe feelings in detail for discussion with supervisor

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Cottage Milieu

Population:

Autistic and retarded adolescent boys and girls, ages sixteen to twenty-four. Range of developmental function: from infancy to five.

Learning Experience:

- Working with one-to-one group of autistic and retarded adolescents in daily skills development: toothbrushing, hand washing, bathing, dressing, feeding, shaving, bed making
- Observe, record, and report patient's behavior, possible changes, deficiencies, improvement, or lack of it
- Reflect, record, and report one's own feelings in regard to individual patients for discussion with supervisor--process experience
- Plan, design, innovate, and implement daily cottage routines
- Report one's impressions at the end of rotation and propose possible innovative changes in standards of care and treatment

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Cottage Milieu

Population:

Chronic psychotic adolescents. Duration of hospitalization: six to twelve months

Learning Experience:

- Basic treatment modalities, behavior modification with level system, and increasing responsibilities and privileges
- Participation in Gestalt therapy sessions, conducted by PSW
- Participation in recreational group activities, conducted by recreational therapist
- Participation in arts and crafts activities and physical exercises, conducted by recreational therapist
- Special assignments in one-to-one work
- Observe, record, and report changes of specially assigned patient's behavior
- Observe, record, and report process of group activities
- Reflect, record, and discuss with your supervisor personal feelings as participant in group process

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Cottage Milieu

Population:

Chronically mentally ill, late adolescents and young adults.

Learning Experience:

- Work in one-to-one relationship with patients in specially designed programs
- Help develop self-help skills
- Various recreational activities
- Outings
- Observe and record improvement and rate of progress and/or lack of it
- Reflect, record, describe in detail, and discuss with your supervisor personal feelings during and following your interaction with patients
- When leaving rotation, make final report to supervisor on the effect of your rotation and suggest possible innovative additions or improvements in the program with patients

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Cottage Milieu

Population:

Adolescent boys and girls, ages six to eighteen, acutely psychotic.

Learning Experience:

- Participation in group therapy sessions, in recreational activities, in milieu activities, in routine team meetings
- Assist in planning, organizing, and implementing recreational activities
- Observe, record, and report group activities and your experience in one-to-one work with a psychotic adolescent
- Reflect and describe in detail personal feelings with your supervisor
- Prepare report after completion of rotation and suggest innovative additions to the program

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Cottage Milieu

Population:

Boys and girls, ages seven to fourteen, with antisocial tendencies, severe personality disorders, severely brain damaged, and autistic children.

Learning Experience:

- Assist in play and small-group therapy sessions on regular basis
- Participate in group treatment and Cub Scout activities and outings
- Participate in socialization activities such as table games, courtyard play, bike safety, body-movement training, swimming, day camp, community trips, etc.
- Individualized activities
- Students are encouraged to design and conduct their own one-to-one for small-group activities within area of expertise unique to their background
- Observe, record, and report process aspects of group activities
- Reflect, record, and discuss process aspect of one-to-one work with patients
- Prepare report on activities at the end of rotation and make suggestions for innovative additions to the program

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Classroom Milieu

Population:

Boys and girls, ages six to twelve, some severely handicapped in expressive speech and in academic skills; others have severe behavior disorders with very limited academic skills and require individualized tutoring.

Learning Experience:

- Group activities in circle--singing, letter recognition, discussion
- Table activities--puzzles, crafts, educational activities
- Audiovisual periods, films and filmstrips
- Individualized work away from the group
- Reading, handwriting, math, language, to limit of child's potential
- Art, snacks, physical education, playground

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Classroom Milieu

Population:

Mostly prekindergarten boys and girls, ages six to eleven, with many different levels of functioning behaviorally, emotionally, socially, and academically. Most of them function on a prekindergarten to second-grade level. Verbal and academic skill deficiencies.

Learning Experience:

- Aide to teacher
- Work directly with children under supervision of the teacher
- Assist in program planning
- Assessment and evaluation
- Work individually with children in academic program
- Work with small groups of children in social studies, reading, math
- Work with groups of children in such activities as music, exercises, games
- Select one child in one-to-one relationship for the entire rotation period (This includes classroom programing, assessment and evaluation, program notes, and involvement with parents)
- Observe and record group process activities and discuss with your supervisor
- Reflect and record personal feelings following involvement with one's special child
- Discuss with supervisor

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Residential Care and Treatment

Classroom for Physical Education

Population:

Boys and girls, ages seven to fourteen, at various stages in their social and emotional development.

Learning Experience:

- Participate in planning physical educational programs, sports activities, special remediation, and physical exercises
- Plan and participate in outings
- Observe, record, and report the effect of physical exercises on disturbed children
- Reflect and record personal feelings in your contact with individual children

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Head Start

Community Head Start Project

Population:

Young, socially disadvantaged, preschool children, ages from three to six, in federally supported program.

Learning Experience:

- Preventive aspects in child development, educationally, intellectually, and emotionally
- Assist mental health coordinator with various program components in Head Start classroom, in home visits, and participation in parent education
- Evaluate child's progress, or lack of progress, in classroom
- Observe, record, and report process aspect of classroom activities
- Reflect and record personal feelings in one-to-one relationship with child and discuss with your supervisor
- Prepare report of your impressions, suggest innovative additions to the program, and submit to the mental health coordinator

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Community College Nursery Activities

Nursery School Classroom

Population:

Young, preschool children, ages three to five, of faculty staff.

Learning Experience:

- Preventive aspects in child development, education, and socialization
- Participation in normal nursery activities
- Affective interaction with one child
- Participation in games and plays
- Visit various community nursery schools and participate in nursery activities
- Visit and participate in community day care centers
- Observe, record, and report your experiences to head of nursery school
- Reflect and describe in detail personal feelings resulting from affective interaction with normal preschool children, discuss with your supervisor

CLINICAL AND EDUCATIONAL ROTATION FOR A.A. STUDENTS

Community Continuing Care Services Section

Community Mental Health

Population:

Socially or emotionally disadvantaged families and children in the community.

Learning Experience:

- Working under supervision of Community Mental Health Center staff
- Participate in placement interviews and visit residential care facilities
- Follow up children in foster home placements
- Visit Satellite Homes and participate in training sessions
- Assist surrogate parents in Satellite Homes on special occasions such as outings in the communities, or in plays and games during weekends
- Involvement in community programs through attendance of meetings of Citizens' Advisory Board and County Regional Center meetings
- Visit therapeutic settings for preschool children
- Visit day care centers and participate in group activities
- Observe, record, and report administrative aspects of experienced activities during this rotation

TABLE D

Clinical and Educational Rotation Services in the Associate of Arts Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Cottage Preschool age and school age children	-implementation of preschool treatment under supervision -one-to-one with autistic children -developing daily self-care skills: teeth brushing, hand washing, bathing, dressing, feeding, bed making -observations, keeping notes	Nursery School: College or Community	-supervised nursery activities -play and games -affective interaction with children
		Therapeutic Nursery School	-one-to-one play therapy -small group affective interaction -behavior control
		Head Start	-parenting -stimulating plays and games -teaching assistant -control of behavior
CTC: Cottage Youngest children, ages 3 to 8, both sexes, autistic children	-participation in preschool and kindergarten activities -motor-perceptual training -sign language -speech language -self-care skills training -learning to coordinate total program for one child, including parents and community -monthly report on child -participation in team meetings -behavior modification training	Day Care Center	-parenting -recreational activities -nursery activities -group activities
		Kindergarten and Elementary School	-teaching assistant -affective interaction -discipline -recreational activities -arts and crafts activities

*CTC--Children's Treatment Center

continued

TABLE D continued

Clinical and Educational Rotation Services in the Associate of Arts Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Cottage Chronic psychotic young adolescents; hospital duration: 6 to 18 months	-implementation of behavior modification oriented treatment -active, ongoing therapies -participation in group therapies, 4 times a week, with Gestalt orientation, also psychodrama -participation in recreational therapies, also cooking classes, arts and crafts, and physical exercises	Playgrounds, Community, Neighborhoods, Camps, Recreational Parks	-recreational activities -safety rules -group leadership -control of behavior -affective interaction in one-to-one
CTC: Cottage Young adolescent girls, aggressive, asocial, and dyssocial	-participation in group therapy -individual one-to-one -one-to-one tutoring -physical education activities in afternoon -off-grounds activities in the evenings		
CTC: Cottage Children, ages 7 to 14, mixed types, boys and girls, (continued)	-normalizing activities of small groups: table games, creative courtyard play, bike safety, body-movement (continued)		

continued

TABLE D continued

Clinical and Educational Rotation Services in the Associate of Arts Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Cottage (continued) severe personality disorders, severe brain damaged, and autistic children	training, swimming, day camp, community trips, one-to-one activities for small groups		
CTC: Gymnasium, Playgrounds	-physical education -dealing with behavior problems -discipline -supervised recreational activities		
CTC: Classroom Boys and girls, very low academic skills, poor speech and language, function around first-grade level	-group activities in circle, singing, letter recognition, table activities, puzzles, crafts, audiovisual films, filmstrips, individualized work, art, snacks, playground, physical education activities		

BACHELOR DEGREE

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Children's Treatment Center: Cottage for Adolescent Girls

Population:

Adolescent girls, ages twelve to seventeen, with aggressive, acting-out, antisocial tendencies, of average or above average intelligence.

Learning Experience:

- Cotherapist in group therapy
- Individual therapy under staff supervision
- One-to-one tutoring
- Involve family in counseling
- Physical education after school
- Outings and trips to the communities
- Observe, record, and report your impressions and experiences
- Reflect and describe in detail the process aspects of dealing with individual girls and in group therapy
- Include in final report innovative suggestions to incorporate in the treatment program

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Children's Treatment Center: Cottage

Population:

Severely psychotic children.

Learning Experience:

- Research assistant in a behavior research laboratory
- Control hyperactive, nonverbal, psychotic children
- Work closely and collaborate with staff
- Carry out experimental prescription exactly
- Observe, record, and report your experiences
- Comment in your final report on possible innovative changes in the program

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Children's Treatment Center: Cottage

Population:

Adolescent boys and girls, ages twelve to sixteen, with antisocial tendencies. Primary problems are behavioral, aggression, withdrawal, inability to get along with peers, school failure, runaway, family conflicts.

Learning Experience:

- Learn appropriate technique of managing teen-age boys and girls
- Limit setting
- Crisis management
- Counseling
- Confrontation
- Supportive therapy
- Diagnostic evaluation and interpretation of behavioral acting out
- Learn about family dynamics
- Interact with families in admission procedures and at family conferences
- Carry out at least one individual and one group therapy assignment
- Participate as team member in all team discussions
- Observe, record, and report nature of group processes

continued

Learning Experiences: continued

- Reflect and describe in detail personal feelings elicited by individual patients and staff members; discuss with your supervisor

- Prepare final report on your observations and processes, and propose innovative additions to program

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Children's Treatment Center: Cottage

Population:

Middle years, boys with broad range of problems, from nonverbal, no self-care skills, autistic and schizophrenic children, to verbal, high-functioning, very aggressive boys.

Learning Experience:

- Participate in therapeutic group activities as assistant to psychologist, psychiatric social worker, sensorimotor integration therapist, speech and language therapist
- Conduct specifically assigned activities autonomously and under supervision
- Observe, record, evaluate, and report impressions from process vantage point
- Reflect, record, and discuss with your supervisor personal feelings experienced while working with psychotic children
- Prepare final report and suggest possible innovative improvement in the program

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Children's Treatment Center: Cottage

Population:

Preadolescent and adolescent girls.

Learning Experience:

- Co-lead small and large groups of therapy sessions
- Participate in individual psychotherapy with psychiatric social service worker as cotherapist
- Design and implement individualized behavioral treatment program
- One-to-one relationship with up to four different girls
- Participate in admission and preadmission procedures for screening of girls
- Write a placement packet; visit placements
- Participate in family therapy sessions
- Participate in unit meetings, staff meetings, and case reviews
- Reflect and describe in detail process aspects of group therapy sessions and personal feelings and reaction to what is going on during sessions
- Suggest innovative additions to treatment program in your final report

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Children's Treatment Center: Classroom for Special Education

Population:

Boys and girls, ages seven to fifteen, mostly psychotic and borderline psychotic.

Learning Experience:

- Diagnostic evaluation (testing: PPUT, ITPA, etc.)
- Behavior modification (discrete trials), shaping, etc.
- Group and individual therapy sessions--receptive/expressive
- Social skills training
- Possibly deaf education when deaf child is on unit
- Reflect, describe in detail, and discuss process aspects when dealing with nonverbal, psychotic children

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Children's Treatment Center: Classroom for Speech and Language

Population:

Boys and girls, ages twelve to fifteen: Mixed group of chronic schizophrenics, borderline psychotics; and high-functioning, acting-out boys with personality disturbances.

Learning Experience:

- Language therapist with five to six children, each in individual sessions
- Dealing with increasing receptive and some expressive language skills
- Practical experience in using speech and language therapy techniques
- Rationale for their use and theoretical background necessary to provide students with opportunities to judge effectiveness of treatment and suggest change, modification, etc.
- Process aspect: assume role of patient and enact speech impediment with fellow student being your therapist, and reverse role with student therapist

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Adolescent Treatment Center

Population:

Late adolescent boys and girls, acutely psychotic, short-term treatment program.

Learning Experience:

- Individual and group therapy
- Counseling under staff supervision
- Participate in physical education, sports activities, recreational activities
- Outings to recreational parks and to other community facilities
- Participate in team meetings as a member of the therapeutic milieu
- Observe, record, and discuss your experiences on the unit
- Reflect, describe in detail your personal feelings which you experience in encounters with individual psychotic adolescents and in group processes
- Make suggestions how to improve program in your final report

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Residential Care and Treatment

Adolescent Treatment Center

Population:

Unit for autistic adolescents and young adults.

Learning Experience:

- One-to-one work in behavior therapy
- Well-specified objectives using discrete trial format
- Research activities

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Seminars and Visits

- Participate in multicultural seminars conducted by members of minority groups
    - Mexican-American heritage
    - Black heritage
    - Structure and dynamics of the Mexican-American family
    - Structure and dynamics of the Black family
    - Socialization of the Mexican-American
    - Mexican-American education
    - Black language communication
- Psychodrama seminars
- Reality therapy seminars
- Attend national conferences on autism
- Visit Fernald Research Center at UCLA
- Visit Frostig and other community learning centers

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Special Rotation Projects: Delinquency

- Probation Department in Simi Valley
    - Assist probation officer in administrative office work

- Involvement in community action while riding along with Simi police during a normal day's action

- Participate in group and camp activities at Ventura Home for Girls

- Visit Youth Authority facilities

- Follow-up assignment of individual dependency cases in foster placement

- Involvement in community projects dealing with problems of child abuse

- Visit juvenile homes in different communities and participate in group activities in various facilities in the Juvenile Justice System including camp activities

CLINICAL AND EDUCATIONAL ROTATION FOR BACHELOR DEGREE STUDENTS

Special Project: Parent Involvement in Treatment and Prevention

- Train parents in early childhood development and early intervention by means of on-site or home teaching sessions using audiovisual material, whenever possible, along with discussion sessions
- Sample topics: envy, jealousy, fear, sibling rivalry, separation, aggression, discipline, divorce, family planning

Special Project: Community Involvement

- Locate and utilize county mental health resources
- Contact referral placement agencies for professional medical evaluations such as developmentally delayed problems, hearing and speech problems, neurological and psychological evaluations
- Refer children for diagnostic examination when behavioral or emotional problems are suspected

Special Project: Office Rotation

- Maintain a record-keeping system
- Special files kept on all special needy children
- Keep a follow-up system to evaluate progress on each child

TABLE E

Clinical and Educational Rotation Services
in the Bachelor of Arts/Science Degree Training Program
for Child Mental Health Specialists

INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
Adolescent Treatment Center: Cottage Short-term, acute psychotic adolescents, ages 16 to 18, male and female	-participation in group sessions -Recovery, Inc. -group realization -one-to-one relationship with patients -planning appropriate treatment schedule under staff supervision -participation in milieu therapy -team meetings -charting, reporting	Head Start	-plan, design, and direct Head Start activities -family counseling
		Day Care Center	-plan, design, and direct day care center
		Satellite Home Parents	-to function in the role of psychological parents and to provide emotional support for a period of several weeks or months to children who need to be separated temporarily from a traumatic home environment
Adolescent Treatment Center Autistic adolescents	-participation in behavior development -closely supervised one-to-one work with autistic adolescents		
CTC: Learning Laboratory Severely psychotic children	-research assistant in behavior research laboratory -control hyperactive, nonverbal, psychotic children -relate well to staff -carry out experimental operations exactly -make intelligent observations and report	Children and Adolescents in Difficult Home Situation with Both or One Parent Only	-after-school and weekend activities -setting up recreational activities for small groups in neighborhoods, for children and adolescents -provide emotional support to one-parent

(continued)

*CTC--Children's Treatment Center

continued

TABLE E continued

Clinical and Educational Rotation Services in the Bachelor of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Cottage Mixed types of children, ages 7 to 14	-clinical assistant role -assist in play and small-group therapy sessions, ongoing basis, includes program-wide group treatment -observe and assist with testing -assist in activity planning and implementation level -conduct activities independently -report results to supervisor and treatment team	Children and Adolescents in Difficult Home . . . (continued)	home -family counseling -arts and crafts activities -sports, etc.
Adolescent Treatment Center Long-term psychotic adolescents	-work with verbally responsive adolescents -structured level system -group and individual therapy -trainees receive psychodrama and assertion training in work with individuals and groups -individual resources or talents such as music, drawing, and painting are used	Services to Violent Families	-application of social/psychological principles to increase the policeman's effectiveness in handling such problems -help parents deal with underlying fear, hurt, and frustration -educate parents to the psychodynamics of child development -identify high-risk families and deal with family dynamics
		Police Station Truants from home or school, for boys and girls	-improve police/community relations, especially in minority group problems -sensitize police to social/emotional problems -involvement of boys (continued)

continued

TABLE E continued

Clinical and Educational Rotation Services in the Bachelor of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Classroom Adolescent girls with various behavior disorders and acting-out problems	-trainee assists the teacher in both the implementation and planning of school activities -student takes the responsibility for the classroom for a pre-arranged period of time under teacher supervision -trainee assists the teacher with controlling children on the behavioral level and with performance on the academic level	Police Station (continued)	and girls in YMCA recreational and sports activities -provide emotional support to families
CTC: Classroom Highest functioning group of adolescent girls, but small and immature, poor social skills, poor self-control, poor frustration tolerance, close to normal academic level	-classroom activities offer three overlapping behavior rewards systems which are continually revised to meet the needs of the children -trainees participate in the operation of the daily school program including team meetings and field trips -trainees may try their own ideas		

continued

TABLE E continued

Clinical and Educational Rotation Services in the Bachelor of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Classroom All boys, ages 9 to 14, acting-out, aggressive, destructive, academically mixed, slow learners, some up to grade level	-limit setting, fine motor program and gross motor program -physical education -group activities in academic and physical education		
CTC: Speech and Language Laboratory Boys and girls, ages 7 to 15, psychotic, autistic children	-evaluation -testing -behavior modification -group and individual sessions -social skills training -possibly deaf education -working with small groups in individual speech therapy -dealing with receptive language skills and expressive skills		
CTC: Adolescent Cottage High- and low-functioning autistic children and adolescents	-ongoing supervision in sensorimotor integration, treatment techniques, and evaluations (continued)		

continued

TABLE E continued

Clinical and Educational Rotation Services in the Bachelor of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Adolescent Cottage (continued)	-practice in writing up treatment plans and carrying out treatment under supervision		
Probation Department; Youth Authority	-individual and group counseling -educational tutoring -mechanical and industrial skills development -vocational guidance -camp activities -backpacking		

MASTER DEGREE

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Special Project: Prevention and Early Intervention

UCLA Medical School, Pediatric Department

Population:

Infants from zero to nine months,
Infants from nine to eighteen months,
Toddlers from eighteen to thirty-six months.

Population includes cerebral palsy, developmental delays, chromosomal disorders, other neurological handicaps, and normal infants and toddlers

Three Different Programs:

Home Intervention Program: Infants whose developmental age is under nine months are seen at home with occasional center-based visits by a team consisting of a teacher-therapist combination.

Infant Program: This program is for infants whose developmental age is about nine to eighteen months. There are eight infants in this group, and they attend two afternoons per week for one-and-one-half-hour sessions.

Toddler Program: This group consists of ten children whose developmental ages are between eighteen and thirty-six months. It meets five mornings per week for three-hour sessions. There is a great deal of flexibility in how often a child attends the program, depending on his or her needs and the parents' desire.

Learning Experience:

- Primary goal is to provide an opportunity for each handicapped child to develop to the best of his potential and for each parent to understand the handicapped child's abilities and disabilities

continued

UCLA Medical School, Pediatric Department continued

Learning Experience: continued

- Approach is broadly based, interdisciplinary teamwork: pediatricians, pediatric neurologists, speech pathologist, head teacher and toddler group lead teacher, infant group lead teacher, physical therapist, occupational therapist, social worker, orthotics consultant, orthopedic surgeon, child psychiatrist
- Ongoing daily sessions of interdisciplinary team members
- Involvement of parents: parents are active participants in discussions and various activities
    - Child's social interaction
    - Play materials
    - Separation difficulties
    - Emotional and developmental needs
    - Speech, language, and other communication means
- Problems connected with referrals, history taking, Gesell Developmental Evaluation, interaction between social worker and parents, community schools, etc.
- Treatment curriculum focuses on four developmental areas: motor, adaptive, language, and personal-social
    - Guidelines for social goals are derived from Gesell and Piaget
    - Strengths and weaknesses are considered
- Referral to community facilities
- Frequent home visits
- Research, videotape of mother-child interaction

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Special Project: Prevention and Early Intervention

Dubnoff Center

Population:

Eighteen months to five-year-old children. High-risk children displaying varied emotional or physical handicaps.

Learning Experience:

- Intensive, cross-disciplinary program in working with high-risk children where families represent the entire socioeconomic and educational range
- Educational experience in on-site teaching with toddlers and preschoolers
- Seminars on developmental evaluation of children, intervention techniques, case presentations, group supervisory sessions, and individual conferences

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Special Project: Prevention and Early Intervention

Childrens Hospital of Los Angeles

Population:

Infants, children, adolescents, with a wide range of medical and surgical problems including acute and chronic hematology-oncology patients; also, asthma, diabetes, osteomylitis, meningitis, diarrhea, and open, draining wounds.

Experimental Project:

Evaluating the usefulness of sterile rooms for protecting children from infection during intensive medical treatment.

Learning Experience:

- Primary objective is to help children cope with their medical experiences and prevent destructive emotional reactions to their hospitalization by:
  - Providing for the psychological, social, and intellectual needs of the patients
  - Providing a psychological climate that facilitates communication and encourages mastery of medical-surgical experiences
  - Providing a range of age-appropriate, multipurpose, pleasurable activities
  - Encouraging peer interaction and establishing trusting adult-child relationships

continued

Childrens Hospital of Los Angeles continued

Learning Experience: continued

- Encouraging the patients to talk to staff about their hospital experiences

- Supporting a positive view of the hospital as being a place where one can find enjoyment as well as suffering

- Encouraging children and adolescents to be active agents in planning involvement in their activities rather than passive receivers of treatment

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Special Project: Community Services:

Prevention, Intervention, and Rehabilitation

Community-Centered Facility
with a Broad Range of Care Services

Treatment center for emotionally disturbed children in Los Angeles, with a foster home department, adoption department, counseling services for unwed parents, and postadoptive counseling services, and day treatment for children living in their own homes.

Learning Experience:

Training facility for social workers and in combination with Reiss-Davis Child Study Center, training center for psychologists, social service workers, diagnostic evaluations, research, and community education programs.

- Intake and counseling
- Consultation to families, agencies, and individuals regarding placement of children
- Residential treatment of children, ages six to eighteen, who cannot live in their own homes because of illness, death, divorce, or serious family conflicts
- Foster care placement
- Premarital counseling--group and individual sessions
- Pregnancy counseling
- Placement of children for adoption
- Postadoptive counseling
- Counseling for unwed parents
- Aftercare counseling

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Special Project in Community

Community-Based Treatment Center for Boys and Girls in Their Late Adolescence

Designed to meet the social, educational, vocational, psychological, and spiritual needs of young people whose problems require them to be placed out of their homes.

Learning Experience:

Purpose of the project is to provide a supportive community where individuals find security and stability as they explore alternatives to their problem behavior.

- Emphasis is placed upon development of self-image and a sense of self-worth through positive psychological, spiritual, social, and emotional experiences
- Each resident is encouraged to take responsibility for his/her own behavior and to eventually assist other residents to do the same
    - Each resident must work or go to school
- The aim of the project is to create an atmosphere in which the individual can mature by making decisions
- Acceptance into the program is based on the individual's motivation and his ability to function in an open community setting

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Community Facility for Acutely Disturbed Adolescents

Woodview-Calabasas Hospital

An eighty-bed private psychiatric hospital serving Southern California with modern treatment programs for patients with serious emotional problems.

Learning Experienc

- Treatment of acutely disturbed adolescents and young adults
- Carefully structured activity program, twenty-four hours a day, including daily school program for each adolescent after careful evaluation of the educational needs
- Involvement of parents of adolescents in group psychotherapy sessions

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Crisis Intervention Project

Population:

Families, children, adolescents, and young adults.

Learning Experience:

- Hospital admissions
- Hospital emergency services
- Mobile emergency team
- Suicide prevention centers
- Drug abuse prevention centers
- Youth crisis programs
- Interface services for adolescents
- Hot Line services
- Child abuse and neglect services
- Abortion services
- Family crisis programs
- Family planning programs
- Well-baby clinics
- Legal services programs

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Community-Based Learning Center

Special Education

Population:

Children, ages five to seventeen, living at home with their own families, attending public school.

Learning Disabilities: Slow learners, perception problems, motor problems, developmentally delayed children.

Learning Experience:

- Administering appropriate diagnostic tests
- Working up results
- Designing individualized testing programs for students to remediate reading, math, perception, motor problems, etc.

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Residential Care and Treatment

Special Project: Physical Therapy

Children's Treatment Center

Population:

Autistic, schizophrenic, and behavior problems of children up to age twelve.

Learning Experience:

- Introduction to sensory integration therapy and its application to emotionally disturbed children
- Clinical testing, evaluation of testing, planning and writing treatment programs, and implementation of treatment
- Students are encouraged to develop specific sensorimotor programs for individual children

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Residential Care and Treatment

Special Project: Occupational Therapy Orientation

Children's Treatment Center: Cottage

Population:

High-functioning and low-functioning autistic children.

Learning Experience:

- Sensorimotor integration with an orientation towards Ayres' theory
- Introduction to philosophy and treatment techniques
- Students will have an opportunity to test patients, write up treatment plans, and carry out treatment under supervision

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Residential Care and Treatment

Special Education Project

Children's Treatment Center: Classroom

Population:

Academically high-functioning and low-functioning autistic children, first to third grade.

Learning Experience:

- Teaching techniques: reading, spelling, phonics, handwriting, cognitive skills, perceptual, fine motor skills, etc.
- Discipline: group and individual
- Operant techniques
- Classroom planning, management
- Assessment and prescription

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Residential Care and Treatment

Special Education: Home Economics

Children's Treatment Center: Classroom

Population:

Adolescent girls and boys, ages thirteen to sixteen, with a broad range of problems, from severely acting out to severely withdrawn personality makeups.

Academic functioning levels from first to ninth grade.

Learning Experience:

- Demonstration and lab methods of teaching
- Planning units of work
- Daily lesson plans for theory and practice skills
- Handling discipline problems of acting-out teenagers
- Setting limits and using individual behavior modification treatment plans
- Follow up cottage group therapy with special emphasis on setting limits
- Exposure to "level system" as it relates to school and total treatment of youngsters
- Observing group interaction in a laboratory classroom where pupils have periods of working together in a group effort

continued

Children's Treatment Center: Classroom continued

Learning Experience: continued

- Experience in handling problems growing out of such group interaction

Responsibilities and Expectations:

- Trainee will observe and be involved in planning activities
- Will give Master teacher-made pre- and post-tests
- Involvement in class discussion of individual treatment plans as they relate to classroom behavior and effort
- Grade for level system
- Work with individuals or small groups
- Observe and participate in cottage group meetings of a particular class
- Will study background on selected pupils
- Will be involved in therapist-teacher discussions concerning particular child or incident when necessary
- Observe, comment, and report on activities
- Reflect, describe in detail, personal feelings elicited by specially assigned pupils to work with as part of process aspect
- Report at end of rotation and suggest possible improvements in program

CLINICAL AND EDUCATIONAL ROTATION FOR MASTER DEGREE STUDENTS

Residential Care and Treatment

Special Project: Program Administration

Children's Treatment Center

Special courses and rotation services are available for students who plan on a career of administering children's residential or day treatment programs.

Learning Experience:

- Rotation on cottages as assistant to cottage coordinators to assist program director, and in the office of program director during certain hours of the day
- Rotation through other administrative offices at the hospital, especially through the office of the hospital medical director, the personnel office, and the office of the director of education
- Rotation through the administrative offices in community mental health centers

TABLE F

Clinical and Educational Rotation Services
in the Master of Arts/Science Degree Training Program
for Child Mental Health Specialists

INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Cottage Adolescent boys, ages 12 to 16 behavioral aggression, inability to get along, school failure, run away, family conflicts	-limit setting -crisis management -counseling -confrontation -emotional first aid -life-space interview -supportive therapy -diagnostic evaluation -interpretation of behavioral acting out -learning about family dynamics -interacting with families during admission and family conferences -individual and small-group therapy assignments	UCLA Medical School, Pediatric Department Child Development Vulnerable or difficult infants, toddlers, young preschoolers Three different programs Home intervention for infants zero to 9 months Toddler program, developmental ages 18 to 36 months Infant program, 9 to 18 months	-admissions -social intervention -analysis of developmental areas -motor -adaptive -language -preschool -social -community work -research -help mothers develop children's full potential -member of interdisciplinary team: pediatrics, psychiatry, surgical, orthopedics, education, special education -parent-teacher training to become agent of change in child's development
CTC: Cottage Preadolescent and adolescent children, mixed group, nonverbal, verbal schizophrenic; high-functioning, aggressive adolescent boys	-collaborate with psychologist, social service worker, sensorimotor integration therapist, speech pathologist, as co-therapist with increasing autonomy	Childrens Hospital of Los Angeles -infants, toddlers, preschool, adolescents (continued)	-multipurpose -provide psychological, social, intellectual needs of patients (continued)

*CTC--Children's Treatment Center

continued

TABLE F continued

Clinical and Educational Rotation Services in the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Cottage Adolescent boys, ages 12 to 15, chronic schizophrenic, acting out, and borderline psychotic	-speech and language therapy -receptive language skills, some expressive skills using specific speech and language techniques and rationale for their use	Childrens Hospital of Los Angeles (continued) Acute medical/surgical illness, or long-term chronic disability Four different programs for acutely and chronically ill children and adolescents	-facilitate communication between children and staff -encourage mastery of medical experiences -promote activities of children rather than passively receiving treatment -encourage expression of fears, fantasies connected with imminent medical and surgical treatment -affective interaction -group activities -individual playtherapy -parents' education and parent effectiveness training program, mostly workshops
CTC: Cottage Adolescent girls, acting out, asocial and antisocial	-group leader -cotherapist of large psychotherapy groups -design and implement individualized treatment program -one-to-one work with girls -participate in admission and preadmission screening -placement planning -visit placements -active participation in family therapy -participation in all unit and staff meetings	Well-Baby Clinic	-provide guidance to mothers in Well-Baby Clinic for normal and vulnerable infants
CTC: Cottage Broad range of children, (continued)	-introduction into sensorimotor integration therapy (continued)	Dubnoff School 18 months to 5 years (continued)	-intensive, cross-disciplinary program -high-risk children of (continued)

continued

TABLE F continued

Clinical and Educational Rotation Services in the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Cottage (continued) mostly autistic, brain damaged	-testing -evaluation -writing treatment program and implementation	Dubnoff School (continued) -varied physical and emotional handicaps	broad spectrum of socioeconomic and educational family background -on-site experience of managing and teaching toddlers and pre-schoolers -participation in seminars on developmental education of children -intervention techniques -case presentation -group sessions -individual conferences
CTC: Classroom Adolescent boys and girls, up to age 16	Special Education: -laboratory methods of teaching -daily lessons and theory and practice skills -management of discipline problems -limit setting -individual behavior modification treatment -level system -management of group interaction -class discussion of individual treatment plans -work with individuals and small groups -involvement in therapist-teacher discussion concerning individual children	Public Schools Normal children	-application of child mental health principles to education in the classroom with focus on process and mutuality of experience between teacher and students, students and students -teaching is not limited to imparting information, but to help children develop their (continued)

continued

TABLE F continued

Clinical and Educational Rotation Services in the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
Community Adolescent Treatment Center Innovative community program for adolescents, ages 16 to 18, coeducational Referred by probation department, public schools, and welfare agencies	-to meet social, educational, vocational, and psychological needs, whose problems require placement out of their homes -developing self-image, sense of self-worth through positive spiritual, psychological, social, and emotional experiences -staff and residents combine efforts to support each of the residents in decision-making and goal-setting experiences -create an atmosphere in which the individual can mature by decision making	Public Schools (continued)	psychological potential for appropriate age levels through decision-making process to prepare students to be active participants in a democratic society -planning special projects with intergenerational participants in which mental health principles can be applied and participated in by the students -teaching students functional parenting and training for future parenting -using day care centers, Head Start, nursery schools, baby-sitting, where they can apply their knowledge
Continuing Care Services Section: in the community Children of all ages	-administration, office organization, management of records and files -casework -participation in placement (continued)	Community Mental Health Centers; Public Health; Obstetric Departments of Medical Schools; Pregnant Women	-anticipatory prenatal guidance -providing emotional support for pregnant mothers to be (continued)

continued

TABLE F continued

Clinical and Educational Rotation Services in the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
Continuing Care Services Section: in the community (continued)	-involvement in community program -participation in meetings of Citzens' Advisory Board -Child Advocacy	Community Mental Health Centers; Public Health; Obstetric Departments of Medical Schools; Pregnant Women (continued)	-member of team -teaching mothers the psychodynamics of child development and the importance of awareness of affective interchange between mother and infant, particularly during the first few days and weeks of the infant's development
Community Learning Center Children and adolescents, ages 5 to 17, learning disabilities, slow learners, perception problems, motor problems, developmentally delayed	-testing -evaluation -designing individualized program for students to remediate reading, math, perception and motor problems		
C C: Classroom Adolescent boys and girls, ages 12 to 15	Special Education: -planning daily school program on different grade levels, mostly individual but some group work -special projects for outdoors -diagnostic tests (continued)		

continued

TABLE F continued

Clinical and Educational Rotation Services in the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Clinical/Educational Rotations/Situations	Activities	Clinical/Educational Rotations/Situations	Activities
CTC: Classroom (continued)	-setting up academic curriculum -group teaching, various subjects -science, social studies -develop various techniques for teaching children		
CTC: Classroom High-functioning academic students, elementary classes	Special Education: -teaching techniques -reading, spelling, phonics, handwriting -cognitive skills -perceptual fine motor skills -group and individual -operant techniques -assessment and prescription		

CAREER APPLICATIONS

1. APPROPRIATE CAREER OPPORTUNITIES FOR ASSOCIATE OF ARTS DEGREE GRADUATES

TABLE G

Employment Possibilities for Graduates
from the Associate of Arts Degree Training Program
for Child Mental Health Specialists

INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
State Mental Hospitals, Children's Facilities, Residential Settings, Group Homes, and Day Treatment Centers	-child care work activities -group activities -plays, games -one-to-one relationship -recreational activities -teach developmentally and otherwise disabled children self-care: feeding, dressing, washing, bathing, toothbrushing, time concept, hours, days, months, years, basic home economics -safety rules -outings to community facilities, to parks, to stores -play therapy -behavior therapy	Nursery Schools	-help design and implement nursery school program -teach preschool children -affective interaction -group and individual activities -encourage peer relationship -plays, games
		Head Start	-teach parents of socially disadvantaged children educational and mental health principles -program of stimulation through parent education -emotional support for mothers -home visits -support of families in their homes -assist in developing intergenerational activities in family
Special Classes in Mental Health Facilities and Public Schools	-assistant to teacher -tutoring -affective interaction -controlling through appropriate discipline		
Satellite Homes	-surrogate parents to (continued)	Community Mental Health Centers	-assistant to family in (continued)

continued

TABLE G continued

Employment Possibilities for Graduates from the Associate of Arts Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
Satellite Homes (continued)	four severely developmentally disabled or mentally ill children	Community Mental Health Centers	distress or crisis with homemaking -provide surrogate parenting in child's home -provide day caring in neighborhoods for working mothers
Foster Homes	-foster parents		
Normal Homes	-homemaking -support families in distress -affective interaction with children in their own homes, in the neighborhoods	Public Schools	-teaching assistant -individual tutoring -affective interaction with children -apply mental health principles in classroom activities -liaison between school and parents -assist in recreational activities and outings

2. APPROPRIATE CAREER OPPORTUNITIES FOR BACHELOR DEGREE GRADUATES

TABLE H

Employment Possibilities for Graduates
from the Bachelor of Arts/Science Degree Training Program
for Child Mental Health Specialists

INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
State Mental Hospital Children's and Adolescent Treatment Centers	-child care work with children -group leadership and one-to-one work -participation as a milieu therapist -charting and reporting behavior of children and adolescents -behavior therapy in one-to-one relationship and with groups of adolescents -life-space therapist -arts and crafts activities -planning and designing sports and recreational programs for adolescents	Nursery School Director; Day Care Center Director	-plan, design, and implement program to meet the educational, social, and emotional needs of preschool children -affective interchange with individual children, in a one-to-one relationship, who need special attention
Group Home	-as above -assistant program coordinator -research assistant	Head Start	-plan, design, and implement program for socially disadvantaged young preschool children with involvement of parents through home visits -program of stimulation through parent education
Classroom Activities in a Mental Health Setting	-assist the teacher in both implementation and planning of school activities	Children and Adolescents in Difficult Home Situation with Both or One Parent Only	-after-school and weekend activities -set up recreational activities for small groups in neighborhoods -provide emotional
	(continued)		(continued)

continued

TABLE H continued

Employment Possibilities for Graduates from the Bachelor of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
Classroom Activities in a Mental Health Setting (continued)	-assist the teacher with specific special education tasks -develop means of controlling the children's behavior -one-to-one tutoring of difficult adolescents -limit setting and appropriate non-punitive discipline -behavior modification techniques -conducts fine motor program and gross motor program as part of the educational program of children and adolescents	Children and Adolescents in Difficult Home Situation with Both or One Parent Only (continued)	support to one-parent home -family counseling -sports activities
Speech and Language Laboratory	-evaluation -testing -behavior modification -group and individual sessions -social skills training -speech therapy with individuals and small groups -dealing with receptive language skills and expressive skills	Services to Violent Families	-provide emotional support -application of social/psychological principles to increase the policeman's effectiveness in handling such problems -help parents deal with underlying fear, hurt, and frustration -educate parents to the psychodynamics of child development -educate parents to the use of nonpunitive measures
		Police Station Truants from home or school, for boys and girls	-Improve police/community relations, especially in minority group problems (continued)

continued

TABLE H continued

Employment Possibilities for Graduates from the Bachelor of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
Probation Department	-individual and group counseling -educational tutoring -mechanical and industrial skills development -vocational guidance -camp activities -backpacking	Police Station (continued)	-sensitize police to social/emotional problems -involvement of boys and girls in YMCA recreational and sports activities
Youth Authority	-individual and group counseling -tutoring -mechanical and industrial skills development -vocational guidance	Satellite Home Parents	-provide psychological parenting to normal children who need to be separated from their own homes and parents because of violence, abuse, or other traumatic home environments
Public Schools	Special Education: -help plan, design, and implement classroom activities -help control children -affective interchange with children who need special attention -tutoring individual children -teacher's assistant	Community Mental Health Center	-participation in preventive child abuse programs

3. APPROPRIATE CAREER OPPORTUNITIES FOR MASTER DEGREE GRADUATES

TABLE I

Employment Possibilities for Graduates
from the Master of Arts/Science Degree Training Program
for Child Mental Health Specialists

INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
Children's Facilities in State Mental Hospitals	-group leader -life-space therapist -play therapist -cottage assistant coordinator -cottage coordinator -assistant program director -program director -planning, designing, implementing, and supervising treatment programs -research assistant	Day Care Centers	-plan, design, and direct program
		Head Start	-plan, design, and develop program -emotional support for parents of socially disadvantaged, young preschool children -program of stimulation through parent education -involve parents through home visits
Youth Authority	-group leader -group therapist -life-space therapist -unit coordinator -individual and group counseling -vocational guidance -develop arts and crafts programs -develop industrial and vocational skills	Therapeutic Nursery Program	-plan, design, and implement therapeutic nursery program
		Children's Hospital in the Community	-psychological care of children and adolescents to master problems arising from medical or surgical intervention
Group Homes in Communities	-group home coordinator -group therapist (continued)	Developmental Disability Clinic in Pediatric Hospitals	-participating member in team approach to (continued)

continued

TABLE I continued

Employment Possibilities for Graduates from the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
Group Homes in Communities (continued)	-family counseling -collaboration with community placement facilities	Developmental Disability Clinic in Pediatric Hospitals (continued)	bring out the potential in disabled or vulnerable children from early infancy to preschool age
Day Treatment Centers	-plan, design, implement, and supervise arts and crafts activities -special education programs and establish liaison with public schools	Well-Baby Clinic	-guidance and training of mothers in principles of psychodynamics of child development -emotional support for mothers
Probation Department	-work with dependent and delinquent children -design, develop, and implement rehabilitation programs -camp activities -backpacking -prevocational training -preparing for employment possibilities -liaison with protective workshops in the community	Community Mental Health Centers Obstetric Departments in Hospitals	-member of team in prenatal guidance of mothers and education in infant development
		Community Mental Health Centers	-infant stimulation and psychodynamics in relationship between mothers and infants -participation in preventive child abuse program through parent education

continued)

TABLE I continued

Employment Possibilities for Graduates from the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
Community Mental Health Centers: Social Work Associate	-continuing care services -case work with agencies -placement of children in foster homes	Services to Violent Families	-provide emotional support -application of social/psychological principles to increase the policeman's effectiveness in handling such problems
Satellite Homes	-parenting -supervision of other Satellite Homes -training surrogate parents and foster parents		-help parents deal with underlying fear, hurt, and frustration -educate parents to the psychodynamics of child development -educate parents to the use of nonpunitive measures
Child Abuse	-emotional support to parents -parent education and teach nonpunitive discipline -family therapy	Police Station Truants from home or school, for boys and girls	-improve police/community relations, especially in minority group problems -sensitize police to social/emotional problems
Public Schools: Special Education Classes	Special Education: -teacher -plan, design, and implement classroom activities -plan, design, and direct special education classrooms		-involvement of boys and girls in YMCA recreational and sports activities

continued

TABLE I continued

Employment Possibilities for Graduates from the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
		Satellite Home Parents	-provide psychological parenting to normal children who need to be separated from their own homes and parents because of violence, abuse, or other traumatic home environments
		Public Schools	-teach normal children -apply mental health principles to process of education -teach students in parenting and functional child development -apply theoretical knowledge to daily living conditions: in homes, day care centers, Head Start, nursery schools, Satellite Homes, day treatment centers, and residential treatment centers
		Public School Principal	-collaborate with (continued)

continued

TABLE I continued

Employment Possibilities for Graduates from the Master of Arts/Science Degree Training Program for Child Mental Health Specialists			
INTERVENTION		PREVENTION	
Employment Possibilities/Situations	Activities	Employment Possibilities/Situations	Activities
		Public School Principal (continued)	mental health professionals, designing curriculum and applying child mental health principles, and using process orientation in classroom activities -involve parents in curriculum development -involve students in supportive roles to families in various community activities -involve students in intergenerational activities involving all ages in the life cycle, including homes for the elderly, and disabled and healthy young children